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# MEDICARE/MEDICAID NURSING HOME INFORMATION

**SOUTH CAROLINA** 

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH CARE FINANCING ADMINISTRATION 87/88

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## MEDICARE/MEDICAID NURSING HOME INFORMATION

1987-1988

## **SOUTH CAROLINA**

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Secretary
U.S. Department of Health & Human Services

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Administrator
Health Care Financing Administration

The Health Care Financing Administration (HCFA) was established on March 9, 1977, to combine health financing and quality assurance programs into a single agency. HCFA is responsible for the Medicare program, Federal participation in the Medicaid program, the Peer Review Organization program, the survey and certification program, and a variety of other health care quality assurance programs.

The mission of HCFA is to ensure the effective administration of its programs in order to promote the timely delivery of appropriate, quality health care to over 56 million of the nation's aged, disabled and poor. The agency must also ensure that beneficiaries are aware of the services for which they are eligible, that those services are accessible and of high quality and that agency policies and actions promote efficiency and quality within the total health care delivery system.

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#### INTRODUCTION

This publication is another significant step in the efforts of the Health Care Financing Administration to provide information to the public in an understandable and usable form. We believe we have an obligation as the federal agency responsible for the Medicare and Medicaid programs to provide a broad range of information about the health care paid for through these programs. Furthermore, we believe that this information is helpful to consumers, health care professionals, researchers, and the health care industry, and we intend to continue our efforts to expand and improve the information we release.

This publication focuses on nursing homes. This is clearly an area of critical concern to many Medicare and Medicaid beneficiaries, their families, and the public in general. As such, I can think of no more important area where we need to provide information to help consumers make informed decisions and to supply the nation's nursing homes information on their performance.

This information is the product of extensive consultation with many individuals, including recognized experts in long term care, consumer advocates, representatives of the nursing home industry, state governments, physicians and nursing home residents and their families. We are grateful for their assistance with this publication. We have made a great effort to make it as clear and useful as possible.

The primary purpose of this information is to provide a solid basis for further, informal inquiry. It is neither the final, definitive word on nursing home performance, nor a guide to answer all questions on selection of a nursing home. Rather, it provides a rich source of background materials on federal and state enforcement programs and considerable information on individual nursing homes.

When properly understood and used, this information is quite useful; it can also be misleading if interpreted incorrectly. To use this information properly, you should read carefully the introductory material, the sections on uses and limitations, how to read the profiles, and the glossary. These sections will assist you in correctly interpreting and making the best use of the information.

Because we realize the limitations of the information, especially in making individual judgments on specific nursing homes, we have included a section entitled, "Further Considerations." This section is designed to help individuals find additional sources of information and ask the kinds of questions that will provide the best information to help make personal decisions on nursing homes. We think individuals who use this information as a source document will be better informed about health care issues they or their family may face. We trust that as a result, they will make more informed and thus better decisions.

William L. Roper, M.D. Administrator

## **USES AND LIMITATIONS**

#### Uses

The primary purpose of this report is to provide a ready source of understandable information about the population and performance of nursing homes. The information is most useful as a basis of inquiry, to assist in asking questions about individual facilities, trends and the enforcement process.

The information presented in this report is taken from the survey reports State surveyors fill out during their annual inspections of each nursing home that participates in Medicare and/or Medicaid. Copies of the full reports are available through the individual State survey agencies. The information describes what conditions were observed in the nursing home at the time of its most recent survey and it includes both:

- general information about a nursing home's population and the characteristics and care needs of its residents; and
- specific information about a nursing home's performance in terms of whether it was found to meet certain Federal requirements that provide some insight as to what kind of care the residents receive.

Making this information more accessible and understandable will benefit both the general public and the nursing home community. This type of information can help potential consumers first to ask knowledgeable questions of their physicians, nursing home representatives and long-term care ombudsmen and then to make informed decisions in the selection of a nursing home.

For example, the information will allow comparisons to be made among facilities as to the proportion of residents with severe skin problems, such as bed sores or other skin breakdowns. It is important to note, however, that while a high proportion of such residents might be indicative of poor quality care, it could also mean that the facility has special expertise in handling such problems and doctors refer their patients there. The consumer could then check related performance indicators (i.e., each resident receives care necessary to prevent skin breakdown; and each resident with a bed sore receives care necessary to promote the healing of the bed sore) to determine whether surveyors had identified any problems in this area and ask nursing home staff why so many residents were in need of special skin care. A subsequent section of this report (see "Further Considerations") provides an illustrative list of the types of questions that potential consumers might ask in the course of selecting a nursing home.

We expect that nursing homes, individually and as an industry, will find the information useful. It will provide information which will allow each facility to determine the health status of its residents in relation to other facilities in the State and the nation. It will also allow each facility to compare its compliance at the time of survey with the compliance of other nursing homes in the State and the nation. The information will also provide a valuable insight into the consistency of standards enforcement within a State and across the country.

#### Limitations

When properly understood and used, this information can be of significant value. However, responsible use of the information depends on a thorough understanding of its limitations.

First, any valid interpretation of this information must take into account the fact that the information comprises the individual judgments of more than 3,000 surveyors in 53 separate State survey agencies. Variations in the deficiency information may in part reflect differences among States and individual surveyors in how requirements are interpreted and applied, rather than genuine differences in facility performance. Similarly, care practices in the field may vary from area to area and differences in the information may reflect these variations as well.

Second, the deficiency findings are not a complete picture of the quality of care in a nursing home. Deficiency findings are a measure of compliance or non-compliance with a particular requirement, and the requirements are minimum standards that nursing homes must meet to participate in Medicare and/or Medicaid. Moreover, the information in each profile describes deficiency findings for only 32 out of more than 500 Federal regulatory requirements that are evaluated during a survey. The absence of a deficiency means that the home met the minimum standard at the time of survey, but the information cannot identify nursing homes that are providing outstanding quality care.

A third limitation stems from the periodic nature of a deficiency-based survey process. Findings are recorded in the course of the survey and thus reflect a "snapshot" of the conditions in the nursing home at that time. The information does not describe the home's success or failure in taking prompt corrective action to remedy problems. Similarly, there is no guarantee that those items in compliance with Federal requirements at the time of survey have remained in compliance.

Finally, the information reflects neither the duration nor the severity of identified deficiencies. A problem may represent a one-time failure of a single staff person, or it may represent an ongoing failure of the facility to provide acceptable quality care.

#### DESCRIPTION OF THE SURVEY AND CERTIFICATION PROCESS

The process of qualifying nursing homes for participation in the Medicare and/or Medicaid programs is known as the survey and certification process. Nursing homes that are approved to take part in Medicare and/or Medicaid and therefore qualified to receive Federal and State funds are required to meet standards set by Federal regulations. These standards are the way the Federal and State governments make sure that nursing homes that receive public monies provide quality care to residents. The standards are developed by the Health Care Financing Administration (HCFA), Department of Health and Human Services (DHHS). The State survey agency in each State inspects (surveys) homes to make sure they meet health, safety, and quality standards. The surveyors are State employees who use Federal forms and standards. HCFA pays States for this survey activity. Information from these surveys is stored in a centralized computer system in Baltimore, Maryland, which is the headquarters of HCFA. The information published in this report was obtained from this system.

The State survey agencies are required to inspect nursing homes at least once a year and report their findings to State and Federal officials. During a survey, a team of surveyors tours a nursing home and looks at all areas of the nursing home that affect the quality of care that residents receive. The size and composition of survey teams, as well as the duration of surveys, vary in different States and in facilities of different sizes.

Surveyors observe how care is actually given to residents. Surveyors interview a sample of the residents and review their medical records. They evaluate the preparation of meals and eating assistance techniques. They check whether residents get prescribed medications in the proper dosage at the correct times. Surveyors also review the records of nursing homes, interview nursing home staff, and observe the home for cleanliness, comfort and safety. These are some examples of what surveyors do when they inspect a nursing home.

The surveyors record their findings on Federal forms. When the survey is completed, they meet with the nursing home officials to discuss their findings. If problems were found by the surveyors, the nursing home has to submit a written plan of correction telling how it plans to correct the problems. If a nursing home is found to have problems, it is given a reasonable amount of time to correct them. State survey agencies use various methods of follow-up review, including revisiting the home to assure that the needed correction has taken place.

If the problems are serious enough to threaten the health and safety of the residents and/or a nursing home fails to correct the problems, the home will not be allowed to continue to participate in the Medicare and/or Medicaid programs. Short of this action, HCFA and the States can also employ an array of other enforcement actions to bring about compliance with State and Federal requirements. Examples of possible actions include monetary fines, bans on new admissions, transfer of residents to other facilities, or placement of the facility in a receivership (i.e., temporary government-ordered management). A description of the certification and licensure program specific to this State is provided in the following section of this report.

#### SOURCES OF INFORMATION

There are many sources you can go to in order to find out about a particular nursing home or about nursing homes in general. The best sources of information will likely be the State Health Department, the local or State long-term care ombudsman program or agency on aging. The ombudsman programs were established under the Older Americans Act to assist nursing home residents and those who represent them. See the "State Government" section below for information on how to contact the State ombudsman program.

Many other agencies and organizations have information on homes in order to make referrals to the public. It may be necessary to obtain information from several organizations before you find the information that you need or want.

## **Public and General Sources**

There are many public and general sources of information on nursing homes. Some of these are:

- Social services departments in local hospitals;
- Nursing home provider associations like the American Health Care Association or the American Association of Homes for the Aging;
- State nursing home associations;
- City or county welfare departments;
- · Religious groups; and
- Better Business Bureaus, local consumer protection offices, and other consumer information groups.

Others who can offer valuable advice include physicians, social workers, clergymen and friends or relatives who have placed someone in a nursing home.

## **State Government**

The following pages give a description of the State licensure and enforcement programs. They also contain information about State government offices that you can contact to obtain information about nursing homes and about the State long-term care ombudsman program.

# South Carolina Department of Health and Environmental Control

2600 Bull Street Columbia, S.C. 29201

Commissioner Michael D. Jarrett



Board
Moses H. Clarkson, Jr., Chairman
Oren L. Brady, Jr., Vice-Chairman
Euta M. Colvin, M.D., Secretary
Harry M. Hallman, Jr.
Henry S. Jordan, M.D.
Toney Graham, Jr. M.D.

#### OVERVIEW OF NURSING HOME LICENSURE PROGRAM

The ultimate goal of the licensing program, and the Office of Health Licensing, is to ensure that the patients, residents, clients and participants receiving services from licensed activities are provided the services they require in a safe and healthy environment. Supporting goals are: developing standards for establishing, maintaining and conducting health care activities; evaluating licensed activities in comparison with standards; and requiring licensed activities to meet standards so that they provide services and facilities which promote clients' health, safety and welfare.

## Organizational Structure

Within the overall organizational structure of the Department of Health and Environmental Control, the Office of Health Licensing is part of the Division of Health Licensing and Certification, Bureau of Health Facilities Construction, Licensing and Certification, which falls under the Deputy Commissioner for Health Facilities and Services Regulations. The office's internal structure is divided into three branches; inpatient health care facilities branch, community residential care facilities branch, and the outpatient and home services branch.

## Functions and Duties

General functions of the Office of Health Licensing are to perform inspections, inquiries and investigations of inpatient health care facilities, community residential care facilities, and outpatient and home services. The office is responsible for preparing correspondence, regulations, reports and special studies pertaining to the operation of licensure programs.

#### OVERVIEW OF OUR ENFORCEMENT SYSTEM

During the inspection process we advise facility staff of conditions which must be improved. We do follow-up inspections and consultation visits to assist them in taking necessary actions. When advising, we must make sure that administrators and others understand that they must determine the specific actions they must take, our recommendations are only alternatives which they may consider. Statutes and regulations authorize the department to impose several types of sanctions: monetary penalties, license revocation, license suspension, license denial. A tremendous amount of time and effort goes into each of those procedures. The decision which is communicated to the licensee or applicant must be thoroughly documented. Any sanction decision may be appealed, requiring additional time and effort. Regardless, if we determine that the imposition of sanctions is warranted by conditions which adversely affect, or have the realistic potential of adversely affecting the health, safety, well-being or comfort of clients or other occupants of a facility or service, then sanctions must be imposed.

- 1. S. C. Dept. Health and Environmental Control Bureau of Certification and Inspection of Care William C. Wilkins, Director 2600 Bull Street Columbia, South Carolina 29201 (803) 734-4530 Division of Health Licensing Alan Samuels, Director (803) 734-4680
- 2. S. C. Long Term Care Ombudsman
  Mary B. Fagan
  Division of Ombudsman and Citizen Services
  1205 Pendleton Street Room 308
  Columbia, South Carolina 29201
  (803) 734-0457 or 734-1874
- 3. Medicaid Fraud
  Mr. Charles Oswald, Director
  Division of Nursing Homes
  S. C. Health & Human Services Finance Commission
  Jefferson Square
  1801 Main Street
  Columbia, South Carolina 29201
  (803) 253-6194
- 4. S. C. Commission on Aging Ruth Q. Seigler, Executive Director 400 Arbor Lake Drive Columbia, South Carolina 29206 (803) 735-0210

#### **Federal Government**

Some agencies of the Department of Health and Human Services (DHHS) also have information about nursing homes. These agencies are:

## Office of the Inspector General (OIG)

The mission of the OIG is to maintain the integrity of DHHS' programs by investigating any reports of fraud, waste or abuse by doctors, hospitals or other providers of health care services such as nursing homes.

If you have reason to believe that a health care service provider is performing unnecessary or inappropriate services or is billing Medicare for services you did not receive, a toll-free Hot Line has been installed by the Department of Health and Human Services' Inspector General.

Toll Free Numbers

Outside Maryland: 1-(800) 368-5779 Inside Maryland: 1-(800) 638-3986

Note: Medicaid issues should first be referred to the appropriate State agency before contacting the OIG Hot Line. In most States, the State fraud and abuse units can be located through the State Office of the Attorney General.

## Administration on Aging (AoA)

The mission of the AoA is to administer the programs and related provisions of the Older Americans Act in a manner which:

- 1) creates and supports a national network on aging;
- 2) develops and oversees a responsive system of services and opportunities to meet the needs of the elderly; and
- 3) serves as a visible advocate on behalf of the elderly in the entire nation.

The Regional AoA Offices listed below can help to put you in touch with the appropriate State or local authorities, depending on the nature of your inquiry or concern.

## **AoA Regional Offices**

Regional Program Director, AoA DHHS Region I Room 2011 JFK Federal Building Boston, MA 02203 (617) 565-1158

Regional Program Director, AoA DHHS Region III 3535 Market Street P.O. Box 13716 Philadelphia, PA 19101 (215) 596-0334

Regional Program Director, AoA DHHS Region V 13th Floor 300 South Wacker Drive Chicago, IL 60606 (312) 353-3141

Regional Program Director, AoA DHHS Region VII Room 384 601 East 12th Street Kansas City, MO 64106 (816) 426-2955

Regional Program Director, AoA DHHS Region IX Room 480 Federal Office Building 50 United Nations Plaza San Francisco, CA 94102 (415) 556-6003 Regional Program Director, AoA DHHS Region II Room 4149 26 Federal Plaza New York, NY 10278 (212) 264-3472

Regional Program Director, AoA DHHS Region IV Suite 903 101 Marietta Tower Atlanta, GA 30323 (404) 331-5900

Regional Program Director, AoA DHHS Region VI Room 1000 1200 Main Tower Building Dallas, TX 75202 (214) 767-2971

Regional Program Director, AoA DHHS Region VIII Room 1185 Federal Office Building 1961 Stout Street Denver, CO 80294 (303) 844-2951

Regional Program Director, AoA DHHS Region X The Third and Broad Building 2901 Third Avenue Seattle, WA 98121 (206) 442-5341

## Office for Civil Rights (OCR)

The mission of OCR is to enforce civil rights statutes that prohibit discrimination in DHHS' programs and to generate voluntary compliance. You may wish to contact an OCR office to report incidents of discrimination by a nursing home or to check on a facility's previous record in this regard.

## **OCR Regional Offices**

Director, OCR DHHS Region I Room 2403 JFK Federal Building Boston, MA 02203 (617) 565-1340

Director, OCR DHHS Region III Room 6300 3535 Market Street P.O. Box 13716 Philadelphia, PA 19101 (215) 596-1262

Director, OCR DHHS Region V 33rd Floor 300 South Wacker Drive Chicago, IL 60606 (312) 353-2520

Director, OCR DHHS Region VII Room 248 601 East 12th Street Kansas City, MO 64106 (816) 426-7277

Director, OCR
DHHS Region IX
Room 322
Federal Office Building
50 United Nations Plaza
San Francisco, CA 94102
(415) 556-8586

Director, OCR DHHS Region II Room 3312 26 Federal Plaza New York, NY 10278 (212) 264-3313

Director, OCR DHHS Region IV Room 1502 101 Marietta Tower Atlanta, GA 30323 (404) 331-2779

Director, OCR
DHHS Region VI
Room 1360
1200 Main Tower Building
Dallas, TX 75202
(214) 767-4056

Director, OCR
DHHS Region VIII
Room 844
Federal Office Building
1961 Stout Street
Denver, CO 80294
(303) 844-2024

Director, OCR DHHS Region X The Third and Broad Building 2901 Third Avenue Seattle, WA 98121 (206) 442-0473

## Health Care Financing Administration (HCFA)

The mission of HCFA is to administer the Medicare and Medicaid programs in a manner which promotes:

- 1) quality health care to eligible beneficiaries;
- 2) awareness of the services for which beneficiaries are eligible; and
- 3) efficiency and quality within the total health care delivery system.

Listed below are the HCFA offices responsible for overseeing the State survey and certification programs:

## **HCFA Regional Offices**

Associate Regional Administrator DHHS Region I, HCFA Division of Health Standards and Quality Room 1309 JFK Federal Building Boston, MA 02203 (617) 565-1331

Associate Regional Administrator DHHS Region III, HCFA Division of Health Standards and Quality 3535 Market Street P.O. Box 7760 Philadelphia, PA 19101 (215) 596-0997

Associate Regional Administrator DHHS Region V, HCFA Division of Health Standards and Quality Room 941 175 West Jackson Boulevard Chicago, IL 60604 (312) 353-9804

Associate Regional Administrator DHHS Region VII, HCFA Division of Health Standards and Quality Room 284 601 East 12th Street Kansas City, MO 64106 (816) 374-2408

Associate Regional Administrator DHHS Region IX, HCFA Division of Health Standards and Quality 100 Van Ness Avenue San Francisco, CA 94102 (415) 556-0041 Associate Regional Administrator DHHS Region II, HCFA Division of Health Standards and Quality Room 3821 26 Federal Plaza New York, NY 10278 (212) 264-3219

Associate Regional Administrator DHHS Region IV, HCFA Division of Health Standards and Quality Suite 601 101 Marietta Tower Atlanta, GA 30323 (404) 331-2488

Associate Regional Administrator DHHS Region VI, HCFA Division of Health Standards and Quality Room 2000 1200 Main Tower Building Dallas, TX 75202 (214) 767-6301

Associate Regional Administrator DHHS Region VIII, HCFA Division of Health Standards and Quality Room 1194 Federal Office Building 1961 Stout Street Denver, CO 80294 (303) 844-4721

Associate Regional Administrator DHHS Region X, HCFA Division of Health Standards and Quality 2901 Third Avenue Seattle, WA 98121 (206) 442-0511 If you wish to contact any of the DHHS agencies, the following list outlines which DHHS regional office has responsibility for your State.

## Region I/Boston

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

## Region III/Philadelphia

Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia

## Region V/Chicago

Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin

## Region VII/Kansas City

Iowa, Kansas, Missouri, and Nebraska

## Region IX/San Francisco

Arizona, California, Hawaii, Nevada, American Samoa, and Guam

## Region II/New York

New Jersey, New York, Puerto Rico, and Virgin Islands

## Region IV/Atlanta

Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee

## Region VI/Dallas

Arkansas, Louisiana, New Mexico, Oklahoma, and Texas

## Region VII/Denver

Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming

## Region X/Seattle

Alaska, Idaho, Oregon, and Washington

#### **FURTHER CONSIDERATIONS**

The information presented in this report can be an important source for potential nursing home consumers and their families to consult during the process of selecting a nursing home. It is also important that potential consumers and their families ask questions of their physicians, nursing home personnel and consumer representatives (such as local long-term care ombudsmen) to help guide them in selecting the best possible facility to meet their needs. The best way to find out about a nursing home is to take the time to visit the home in person, if possible, before you make your choice.

Listed below are some examples of the kinds of questions that potential nursing home consumers should ask before selecting a home and some things you should do to find out about the home during your visit. These questions are intended to augment the information contained in this report. Keep in mind that they are not a comprehensive list but an illustrative list of suggested issues that should be considered in choosing a nursing home.

#### General

- Find out who owns the home and whether it is approved for participation in the Medicare or Medicaid programs.
- Make an appointment to visit the home. Meet with the administrator, the director of nursing and the director of social services and ask them about the history of the home and the services it offers.
- Ask about the home's last survey, what problems were found and if and how they have been corrected. Ask whether the facility has been surveyed since the survey described in this report. You can ask to see the survey results.
- Ask whether the State has initiated any punitive actions against the home in the last 2 years, and if so, what actions were taken and how they were resolved. You may want to verify this information through other sources such as the State nursing home ombudsman.
- Ask about the home's admission policies and ask for a copy of any admission agreement that is required.
- Ask to see a copy of the home's residents' rights policy. Does the facility have any special programs/procedures to help educate residents and staff about their rights? You can observe for yourself during your visit how well the home is honoring these rights.
- Ask about the home's basic daily rate and what is included in the charges. Also ask how the home handles residents' personal funds, if such assistance is necessary.
- Find out about the home's visiting hours and what choices residents have as to the time they can get up, eat and go to bed.
- See if residents look well cared for and properly groomed. Do staff treat the residents with courtesy and respect? If the opportunity arises, chat with a resident or two to get their impressions.
- Find out if the home has an organized resident council or other type of resident group. How often does it meet and what are some of its activities and accomplishments? Also, is there an organized family council that family members can participate in?

## **Physical Environment**

- Ask for a tour of the facility and try to see all the major areas of the home, including dining areas and some residents' rooms.
- Note whether the home is an attractive, clean and comfortable place to be. Is it well-lit and ventilated and free of potential health hazards such as obstacles in hallways or underfoot? Is it free from insects and rodents?
- Look at the residents' lounge and other common areas and see if they look comfortable and whether they are used by residents. Do residents have the opportunity to sit outdoors in comfortable, safe surroundings?
- Check toilet and bathing facilities and note whether they are clean, sanitary and reasonably free of odors. Are they easily accessible to handicapped residents?
- Note whether residents' rooms have windows and access to the corridor. Does each resident have a reading light, comfortable chair, sufficient closet space? How many people are in each room and are there privacy curtains?

## **Medical and Nursing Services**

- Find out how medical care and direction is provided in the facility. Who is the medical director? Will a resident's personal physician be able to visit as needed, and cooperate with the medical director? What happens if hospital or emergency care is needed?
- Ask if the home specializes in providing any particular type of medical care. Be sure to inquire about how the home cares for residents who share your particular medical problems or care needs.
- Ask about the availability of specialized care to restore physical abilities lost due to illness or injury. Physical therapy, speech therapy and occupational therapy are examples of this type of specialized care.
- Ask how many registered nurses and licensed practical nurses are employed by the home and how many of each are on duty during days, evenings, nights and weekends. How many residents are under the care of each type of nurse?
- Ask how often a resident's medication schedule is reviewed for possible dosage reductions, adverse interactions or reactions, or expirations. Who is accountable for pharmaceutical services?
- Ask how the home provides dental care to its residents.

#### Food

- Ask at what times meals are served and whether snacks are available. Ask to see the menus for a week. Are substitutions readily available?
- Observe how food is served. Does it look appetizing? Do residents appear to be enjoying their meals?

#### Social Services and Activities

- Ask to see the schedule of activities for a week. Does the facility have a varied activities program suitable for residents with different interests and capabilities?
- Ask if there is an activities coordinator and see if there is suitable space available for activities.
- Find out whether the facility has a full-time social services director and ask what social services and mental health and other counseling services are available to residents and their families. Does the facility have specialized services/programs available for residents with special disorders and disabilities, including Alzheimer's Disease?

#### **GLOSSARY OF TERMS**

## Resident Characteristics and Facility Performance Indicators

This glossary contains terms used to describe certain common features or characteristics of people who enter nursing facilities and common features or indicators of how well the facility provides quality care.

**Bed Sore.** A bed sore is an open sore that occurs more often to a resident with little muscle tissue or fat and who remains in one position for a long period of time. A bed sore may form on bony areas, such as at the base of the spine, heels, and ankles. Other names for a bed sore are "pressure sore" or "decubitus."

## Catheter. See Urinary Catheter.

Colostomy or Ileostomy. A resident who has serious intestinal difficulties may have surgery which creates an artificial opening at the abdomen for bowel movements. Colostomy or ileostomy care involves keeping the skin around the colostomy or ileostomy clean and free from sores. For a resident who wears a bag to collect bowel movements, care also involves emptying the bag regularly and keeping the bag free of odor.

Fluids Supplied Through Tubes. A resident who cannot eat enough food to stay healthy may receive nourishment in the form of fluids prescribed by a physician. These fluids are usually given by inserting a needle or a tube into a vein. Care involves making sure that the needle or tube stays free of germs and that it stays in the vein.

**Incompetent.** A resident who cannot make decisions because of impairments in mental ability may be called incompetent. This is often a legal term meaning a court has decided that the person cannot make decisions, but it is also used as a descriptive term.

Injections. Medicine given by inserting a needle into muscle or tissue.

**Isolation Techniques.** These are methods to ensure that infection does not spread from one part of a resident's body to another, or from one resident to another.

**Rehabilitative Bowel and Bladder Training.** A resident with difficulty controlling bowel or bladder may participate in a program to learn to control these functions.

**Respiratory Care.** A resident who has trouble breathing may need assistance which may be given by breathing in extra oxygen or receiving medication. Respiratory care involves giving the amount of oxygen or medication in the way and in the amount that the doctor has ordered.

**Restraints.** Residents who need to be protected from hurting themselves or others may need to be restrained. One type of restraint is physical. For example, to keep a resident from falling out of a wheelchair a physician may prescribe a cloth protective device or a vest. Drugs (medications) may also be provided to treat and modify a resident's physically aggressive behavior. However, medications must be prescribed in doses and for a length of time necessary to treat symptoms.

**Skin Breakdown.** When a resident remains in one position for a long period of time, his or her skin may be damaged. One of the first signals that this is happening is that reddened areas appear on the places where the resident has placed pressure from sitting in a chair or lying in bed. These reddened areas do not go away even after the positioning of the resident has been changed. If special care is not given, bed sores may develop. See **Bed Sore**.

**Suctioning.** A resident who is unable to cough up fluids or mucus in the air passages may have a tube inserted into the air passages to suck the fluids out. Care involves making sure that the fluids are removed as often as necessary and that the tube used is always free of germs.

**Tracheotomy Care.** A resident who has difficulty breathing may have an operation which makes a breathing passage from the base of the neck into the lungs. This opening is called a tracheotomy. Care involves keeping the breathing passage clean and free from congestion.

**Transferring.** This term has two meanings. First, it is used to describe the extent to which a resident is dependent on others to move from bed to chair, bed to toilet, chair to bath, etc. Transferring is also used to describe moving from one section of a facility to another or from one facility to another.

Urinary Catheter. A tube inserted into the bladder to remove urine.

#### HOW TO READ THE INFORMATION

Before reading the individual nursing home profiles that make up this report, it would be helpful to understand the format and presentation of the information in each profile.

NURSING HOME PROFILE Happy Valley Nursing Home						
Street Address:		City and State:				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			

The first 3 lines of the profile contain basic information about each nursing home. Following is an explanation of the items included:

Name: Self-explanatory
Street Address: Self-explanatory
City and State: Self-explanatory

**Participation:** The information in this block indicates whether the nursing home participates in the Medicare program, the Medicaid program, or both programs. In addition, this block identifies the level of care that the nursing home provides. These include:

Skilled Nursing Facility (SNF) — A nursing home which provides the level of care that comes closest to hospital care with 24-hour nursing services. Regular medical supervision and rehabilitation therapy are also provided. Generally, a skilled nursing facility cares for convalescent patients and those with long-term illnesses.

Intermediate Care Facility (ICF) — A nursing home which provides less extensive health related care and services. It has regular nursing service, but not around the clock. Most intermediate care facilities carry on rehabilitation programs, with an emphasis on personal care and social services. Mainly, these homes serve people who are not fully capable of living by themselves, yet are not necessarily ill enough to need 24-hour nursing care.

Many nursing homes participate in both the Medicare and Medicaid programs, and qualify as both skilled nursing facilities and intermediate care facilities.

**Number of Beds:** This is the total number of beds in the nursing home, including those that are approved for Medicare and Medicaid and those that are not. Many nursing homes have beds that are "private;" these are included in the number even though the facility does not receive Medicare or Medicaid money for them.

Type of Ownership: This block describes the type of organization that operates the nursing home. These include:

Non-profit-religious — A nursing home affiliated with a religious organization, governed by a board of directors and financed largely by contributions.

Non-profit-private — A nursing home not affiliated with a religious or a community based organization and financed largely by contributions.

Non-profit-other — A nursing home which is generally governed by a community based board of directors and financed largely by contributions.

Proprietary — A nursing home operated for profit.

Government — A nursing home primarily administered by the Federal government, the State, or the county, city or other local unit of government.

**Survey Date:** The day on which the nursing home inspection described in this report was completed. All of the information contained in the nursing home profile reflects the conditions on this date. Note that surveys are being conducted on an ongoing basis, and thus, more recent survey results may become available subsequent to publication of this report.

SELEC	TED RESIDENT CHARACTERI					
Total Residents on Day of Survey:	Medicare Residents:	Me	edicaid Residents:			
Caution: A large number of residents with these chara	cteristics does not indicate whether those residents are	receivina	FAC	ILITY	STATE	NATION
	ility's ability to provide highly specialized care and serv		#	%	%	%
Bathing				}		

The "Selected Resident Characteristics" section of the profile contains important information describing the population of the nursing home. Surveyors obtain this information from the facility at the time of survey. The first line of this section shows the total number of residents living in the home and indicates how many of the home's residents are Medicare or Medicaid recipients. Next, the profile tells how many of the nursing home's residents fall into each of 13 selected care categories. These categories reflect common characteristics of nursing home residents that relate to the amount and types of care that they need. They describe the degree of assistance required by residents in carrying out the basic activities of daily living (e.g., bathing, dressing, eating) as well as other characteristics that provide information on the health care needs of residents (e.g., residents who are unable to get out of bed without assistance, residents with special skin care needs, residents on bowel and bladder retraining programs.)

The example above shows the first care category included in each nursing home profile, "Bathing." Following is an explanation of information provided in the profile:

Column 1 — Facility, #: Indicates that 78 residents of the nursing home require some or total assistance in bathing.

Column 2 — Facility, %: Indicates that the 78 residents who require assistance in bathing represent 83% of the nursing home's total population.

Column 3 — State, %: Indicates that, in the State where the nursing home is located, 81% of all skilled nursing facility residents require assistance in bathing.

Column 4 — Nation, %: Indicates that, for the nation as a whole, 81% of all skilled nursing facility residents require assistance in bathing.

The profile then provides similar information for each of the remaining care categories. Note that many residents will be included in more than one of the care categories.

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"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FA			
below does not reflect the severity or the duration of the problems leading to a deficiency.  A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STA #	ATE %	NAT #	ION %
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed	MET	6	5.0	489	5.0

The last section of the profile "Selected Performance Indicators," tells about the nursing home's performance in meeting Federal quality of care requirements. The profile includes 32 performance indicators selected for their usefulness in describing important aspects of a nursing home's performance. Each indicator is based on a specific regulatory requirement that nursing homes must meet to participate in Medicare or Medicaid.

As shown in the example above, the profile indicates for each performance indicator whether the nursing home met or did not meet minimum Federal requirements on the date of its most recent inspection by State surveyors. Following is an explanation of the information provided in the sample profile for the first performance indicator, "The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed."

Column 1 — Facility Met/Not Met: Shows either "Met" or "Not Met." "Met" means that the nursing home performed satisfactorily in this area. "Not Met" would mean that the home did not perform satisfactorily in this area.

Column 2 — State, #: Indicates that there were 6 skilled nursing facilities in the State that did not perform satisfactorily in this area.

Column 3 — State, %: Indicates that the 6 facilities that did not perform satisfactorily represent 5% of the skilled nursing facilities in the State.

Column 4 — Nation, #: Indicates that there were 489 skilled nursing facilities in the nation that did not perform satisfactorily in this area.

Column 5 — Nation, %: Indicates that the 489 facilities that did not perform satisfactorily represent 5% of all skilled nursing facilities in the nation.

## NURSING HOME PROFILE ABBEVILLE NH

Street Address:		City and State:	
THOMPSON CIR		ABBEVILLE SC 29620	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	94	PROPRIETARY	05/06/87

## SELECTED RESIDENT CHARACTERISTICS

0 acteristics does not indicate whether those re. It may reflect the facility's ability to provide	EAC	3	18		
	ΕΔC	38			
e. It may reflect the facility's ability to provide	IAC	ILITY	STATE	NATION	
	#	%	%	%	
ance in bathing.	47	94.0	86.1	81.5	
ance in dressing.	46	92.0	90.6	83.2	
ance in toileting.	44	88.0	82.6	73.8	
tance moving from bed to chair or to	46	92.0	81.4	77.2	
ital loss of bowel or bladder control.	38	76.0	74.3	68.2	
and bladder retraining program.	0	0.0	4.2	4.6	
5, 5					
quiring assistance with eating.	28	56.0	45.2	37.7	
	2	4.0	4.2	3.4	
	37	74.0	61.6	50.8	
	13	26.0	43.9	41.3	
	37	74.0	69.6	58.4	
	2	4.0	7.0	7.1	
	11	22.0	40.8	31.2	
	tance in dressing.  tance in toileting.  tance moving from bed to chair or to  tal loss of bowel or bladder control.  and bladder retraining program.  quiring assistance with eating.	tance in dressing.  tance in toileting.  tance moving from bed to chair or to  46  tal loss of bowel or bladder control.  38  and bladder retraining program.  0  quiring assistance with eating.  28  2  37  13	tance in dressing.  46 92.0  tance in toileting.  44 88.0  tance moving from bed to chair or to  46 92.0  and bladder retraining program.  0 0.0  quiring assistance with eating.  28 56.0  2 4.0  37 74.0  . 2 4.0	tance in dressing. 46 92.0 90.6  tance in toileting. 44 88.0 82.6  tance moving from bed to chair or to 46 92.0 81.4  stal loss of bowel or bladder control. 38 76.0 74.3  and bladder retraining program. 0 0.0 4.2  quiring assistance with eating. 28 56.0 45.2  2 4.0 4.2  37 74.0 61.6  13 26.0 43.9  37 74.0 69.6	

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		CILITIES MENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	SI	ГАТЕ	NA <sup>-</sup>	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	МЕТ	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8
			1		

**Reminder:** The results of the full survey are available from the State survey agency or the State ombudsman.

## NURSING HOME PROFILE

	AIREN NH						
Street Address:		City and State:					
123 DUPONT DR		AIKEN SC 29801					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	86	PROPRIETARY	02/10/88				

## SELECTED RESIDENT CHARACTERISTICS

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
85	1		6	<b>37</b>	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate can highly specialized care and services.	re. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assis	tance in bathing.	82	96.5	86.1	81.5
Dressing					
Residents requiring some or total assis	tance in dressing.	81	95.3	90.6	83.2
Toileting					
Residents requiring some or total assis	tance in toileting.	69	81.2	82.6	73.8
Transferring					
Residents requiring some or total assistance moving from bed to chair or to tub or toilet.			80.0	81.4	77.2
Continence					
Residents with catheters or partial or to	otal loss of bowel or bladder control.	56	65.9	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	1	1.2	4.2	4.6
Eating					
Residents receiving tube feedings or re	quiring assistance with eating.	44	51.8	45.2	37.7
Completely bedfast residents.		0	0.0	4.2	3.4
Residents confined to chairs.		66	77.6	61.6	50.8
Residents requiring restraints.		42	49.4	43.9	41.3
Confused or disoriented residents.		60	70.6	69.6	58.4
Residents with bed sores.		8	9.4	7.0	7.1
Residents receiving special skin care.		48	56.5	40.8	31.2

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FA REOUIREM		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	МЕТ	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	МЕТ	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY		R & PERCI		
facility must meet. There are over 500 separate requirements. The information presented		NOT	MEETING	REOUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NATION	
denoted by may represent an ongoing problem of a one-time failure of a single start person.	MET	#	%	#	% _
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

**Reminder:** The results of the full survey are available from the State survey agency or the State ombudsman.

NURSING HOME PROFILE
MATTIE CHAFFEE HALL HEALTH CARE CENTER

Street Address:		City and State:	
830 LAURENS STREET NORTH		AIKEN SC 29801	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	132	LOCAL GOVERNMENT	01/07/88

## **SELECTED RESIDENT CHARACTERISTICS**

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				Medicaid Resid		
126	5	69						
Caution: A large number of residents with these chara	cteristics does not indicate whether those	FACILITY STATE NA		NOTTAN				
residents are receiving appropriate or inappropriate car highly specialized care and services.	3. It may reflect the facility's ability to provide		# % %					
Bathing								
Residents requiring some or total assist	ance in hathing	98	77.8	86.1	81.5			
Dressing	and in balling.		77.0	00.1	01.0			
•								
Residents requiring some or total assist	ance in dressing.	109	86.5	90.6	83.2			
		99	78.6	82.6	73.8			
		101	80.2	81.4	77.2			
			00.2					
		78	61.9	74.3	68.2			
		5	4.0	4.2	4.6			
Eating								
Residents receiving tube feedings or rea	quiring assistance with eating	47	37.3	45.2	37.7			
Treate its reserving tase resultings of res	quining accidiance with catting.							
			1.6	4.2	3.4			
Completely bedfast residents.		2	1.6	4.2	3.4			
Residents confined to chairs.		72	57.1	61.6	50.8			
-								
Residents requiring restraints.		59	46.8	43.9	41.3			
Confused or disoriented residents.		78	61.9	69.6	58.4			
Confused or disoriented residents.		, ,	01.0	00.0	- 00.1			
			-					
Residents with bed sores.	•	7	5.6	7.0	7.1			
		16	12.7	40.8	31.2			

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
elow does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT MET	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	мет	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT MET	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		# %		#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	11	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

Reminder: The results of the full survey are available from the State survey agency or the State ombudsman.

## NURSING HOME PROFILE ANDERSON HEALTH CARE CENTER

Street Address:		City and State:	
1501 E GREENVILLE ST		ANDERSON SC 29621	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	290	PROPRIETARY	10/23/87

## SELECTED RESIDENT CHARACTERISTICS

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
,					
192  Caution: A large number of residents with these characters.	6	115		DIATION	
residents are receiving appropriate or inappropriate care		FACILITY STATE I		NATION %	
highly specialized care and services.  Bathing		π	/6	/6	/6
Datining					
Residents requiring some or total assista	ance in bathing.	178	92.7	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	181	94.3	90.6	83.2
Toileting	3				
Residents requiring some or total assista	ance in toileting.	144	75.0	82.6	73.8
Transferring	<u> </u>				
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	133	69.3	81.4	77.2
Continence					
Residents with catheters or partial or tot	al loss of bowel or bladder control.	140	72.9	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	6	3.1	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	91	47.4	45.2	37.7
Completely bedfast residents.		31	16.1	4.2	3.4
Residents confined to chairs.		101	52.6	61.6	50.8
Residents requiring restraints.		54	28.1	43.9	41.3
Confused or disoriented residents.		135	70.3	69.6	58.4
Residents with bed sores.		17	8.9	7.0	7.1
Residents receiving special skin care.		90	46.9	40.8	31.2

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITY NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET/ NQT	SI	TATE	NA	LION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.		2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
pelow does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE ELLENBURG NURSING CENTER INC

	201101110111		
Street Address:		City and State:	
611 E HAMPTON ST		ANDERSON SC 29621	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	176	PROPRIETARY	09/11/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Resid			
171	171			36	
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate carr	teristics does not indicate whether those	FACILITY		STATE	NATION
highly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	150	87.7	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	158	92.4	90.6	83.2
Toileting		-			
Residents requiring some or total assist	ance in toileting.	132	77.2	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	134	78.4	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	115	67.3	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	13	7.6	4.2	4.6
Eating	9, -9				
Residents receiving tube feedings or rec	quiring assistance with eating.	51	29.8	45.2	37.7
	, and a second control of the second control				
Completely bedfast residents.		21	12.3	4.2	3.4
Residents confined to chairs.		80	46.8	61.6	50.8
Residents requiring restraints.		42	24.6	43.9	41.3
Ticoldento requiring restraints.					
Confused or disoriented residents.		153	89.5	69.6	58.4
Comused of disoriented residents.					
Residents with bed sores.		7	4.1	7.0	7.1
nesidents with Deu Sores.					
Decidents receiving exceletation of		38	22.2	40.8	31.2
Residents receiving special skin care.		- 00		. 5.0	J

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCI MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.				PERCENT OF FACILI ETING REOUIREMENT	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION .
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	мет	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	мет	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	МЕТ	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE

PA 111/2141 1411								
Street Address:		City and State:						
208 JAMES ST		ANDERSON SC 29621						
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICARE/MEDICAID SNF/ICF	44	PROPRIETARY	12/07/87					

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:								
42	0	37						
Caution: A large number of residents with these characteristics.		EAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate care highly specialized care and services.		#	%	%	%			
Bathing								
Residents requiring some or total assista	ance in bathing.	32	76.2	86.1	81.5			
Dressing	3							
Residents requiring some or total assista	ance in dressing	39	92.9	90.6	83.2			
Toileting	ance in dressing.	00	32.3	30.0	00.2			
Residents requiring some or total assista	ance in toileting	33	78.6	82.6	73.8			
Transferring	and an teneting.							
Residents requiring some or total assistated tub or toilet.	ance moving from bed to chair or to	37	88.1	81.4	77.2			
Continence								
Residents with catheters or partial or tot	tal loss of bowel or bladder control.	30	71.4	74.3	68.2			
Residents on individually written bowel a	and bladder retraining program.	1	2.4	4.2	4.6			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	24	57.1	45.2	37.7			
Completely bedfast residents.		2	4.8	4.2	3.4			
Residents confined to chairs.		32	76.2	61.6	50.8			
Residents requiring restraints.		24	57.1	43.9	41.3			
Confused or disoriented residents.		24	57.1	69.6	58.4			
Residents with bed sores.		2	4.8	7.0	7.1			
Residents receiving special skin care.		3	7.1	40.8	31.2			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	NAT	TION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.		2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Foilet and bath facilities are clean, sanitary, and free of odors.		3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE BAMBERG CO MEMORIAL NURSING CENTER

Street Address:		City and State:	
NORTH + MCGEE STS		BAMBERG SC 29003	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	22	LOCAL GOVERNMENT	05/06/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:									
22											
Caution: A large number of residents with these characteristics are residents.		FAC	ILITY	STATE	NATION						
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%						
Bathing											
Residents requiring some or total assists	ance in bathing.	22	100	86.1	81.5						
Dressing											
Residents requiring some or total assista	ance in dressing.	21	95.5	90.6	83.2						
Toileting											
Residents requiring some or total assista	ance in toileting.	20	90.9	82.6	73.8						
Transferring											
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	20	90.9	81.4	77.2						
Continence											
Residents with catheters or partial or tot	tal loss of bowel or bladder control.	14	63.6	74.3	68.2						
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6						
Eating											
Residents receiving tube feedings or rec	quiring assistance with eating.	11	50.0	45.2	37.7						
Completely bedfast residents.		3	13.6	4.2	3.4						
Residents confined to chairs.		17	77.3	61.6	50.8						
Residents requiring restraints.		15	68.2	43.9	41.3						
Confused or disoriented residents.		15	68.2	69.6	58.4						
Residents with bed sores.		0	0.0	7.0	7.1						
Residents receiving special skin care.		6	27.3	40.8	31.2						

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the governor the duration of the problems leading to a deficiency.			R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FA REOUIREM		
	NOT	STATE		NAT	TION	
deficiency may represent an origoning problem of a one-time failure of a single stan person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

#### NURSING HOME PROFILE BARNWELL CO NH

		00 (11)	
Street Address:		City and State:	
WREN ST BOX 588		BARNWELL SC 29812	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	40	LOCAL GOVERNMENT	08/13/87

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	-
40	1	35			
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	30	75.0	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	37	92.5	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	40	100	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	40	100	81.4	77.2
Continence					
Residents with catheters or partial or to	31	77.5	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	20	50.0	45.2	37.7
Completely bedfast residents.		1	2.5	4.2	3.4
Residents confined to chairs.		26	65.0	61.6	50.8
Residents requiring restraints.		30	75.0	43.9	41.3
Confused or disoriented residents.		37	92.5	69.6	58.4
Residents with bed sores.		3	7.5	7.0	7.1
Residents receiving special skin care.		40	100	40.8	31.2

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITI NOT MEETING REQUIREMENTS			
elow does not reflect the severity or the duration of the problems leading to a deficiency. A eficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET/ NOT			NATION	
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		Y NUMBER & PERCENT OF FACILITI			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	NOT MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	NOT MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

# NURSING HOME PROFILE BAY VIEW NURSING CENTER

 Street Address:
 City and State:

 S TODD DR BOX 1103
 BEAUFORT SC 29902

 Participation:
 # of Beds:
 Type of Ownership:
 Survey Date:

 MEDICARE/MEDICAID SNF/ICF
 132
 NON-PROFIT PRIVATE
 03/17/88

SELECTEL	RESIDENT CHARACTERIST	162				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
116	0	62				
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	103	88.8	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	104	89.7	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	97	83.6	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	97	83.6	81.4	77.2	
Continence						
Residents with catheters or partial or to	89	76.7	74.3	68.2		
Residents on individually written bowel	and bladder retraining program.	39	33.6	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	69	59.5	45.2	37.7	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		79	68.1	61.6	50.8	
				ļ		
Residents requiring restraints.		57	49.1	43.9	41.3	
Confused or disoriented residents.		71	61.2	69.6	58.4	
Residents with bed sores.		4	3.4	7.0	7.1	
Residents receiving special skin care.		26	22.4	40.8	31.2	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
			ATE	NAT	ION	
The state of the s	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	NOT MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6	

facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACIL NOT MEETING REOUIREMEN			
		STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	МЕТ	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	МЕТ	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE

	DOND	EE NN	
Street Address:		City and State:	
PO BOX 858		BENNETTSVILLE SC 29512	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	111	PROPRIETARY	10/15/87

SELECTEL	RESIDENT CHARACTERIST	105				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
110	110 0			9		
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	91	82.7	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	104	94.5	90.6	83.2	
Toileting	· · · · · · · · · · · · · · · · · · ·					
Residents requiring some or total assist	ance in toileting.	93	84.5	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	93	84.5	81.4	77.2	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.			76.4	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	2	1.8	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	50	45.5	45.2	37.7	
Completely bedfast residents.		₹ O	0.0	4.2	3.4	
Residents confined to chairs.		84	76.4	61.6	50.8	
Residents requiring restraints.		24	21.8	43.9	41.3	
Confused or disoriented residents.		55	50.0	69.6	58.4	
-						
Residents with bed sores.		3	2.7	7.0	7.1	
Residents receiving special skin care.		23	20.9	40.8	31.2	

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	
			1	1	L	

# NURSING HOME PROFILE HEALING SPRINGS ICF

Street Address:		City and State:	
PO BOX 518		BLACKVILLE SC 29817	
Participation:	# of Beds:	Type of Ownership:	Survey Date:

MEDICAID ICF 26 PROPRIETARY 03/11/88

SELECIEL	RESIDENT CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
26	0	23				
Caution: A large number of residents with these chara			FACILITY STATE N			
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	20	76.9	74.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	26	100	79.3	76.7	
Toileting	<u> </u>					
Residents requiring some or total assist	ance in toileting.	18	69.2	61.9	63.4	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	22	84.6	63.3	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	13	50.0	54.5	59.1	
			í			
Residents on individually written bowel	and bladder retraining program.	0	0.0	3.6	6.1	
Eating						
Residents receiving tube feedings or re-	quiring assistance with eating.	0	0.0	17.7	29.3	
Completely bedfast residents.		0	0.0	0.6	3.6	
Residents confined to chairs.		2	7.7	24.8	39.1	
Residents requiring restraints.		1	3.8	18.6	31.7	
Confused or disoriented residents.		15	57.7	58.2	55.8	
Residents with bed sores.		0	0.0	2.7	4.7	
Residents receiving special skin care.		3	11.5	14.3	24.0	

facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.  The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.  The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET/ NOT MET MET	ST #	ATE %	NA <sup>-</sup>	FION %
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.  The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing	MET	#	1	+	T
responsibilities of residents are followed.  The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing	MET	0			1
personal funds. An accounting report is made to each resident in a skilled nursing			0.0	65	1.2
	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ERCENT OF FACILITIES ING REOUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding,	MET	3	12.0	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	6	24.0	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	7	28.0	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	6	24.0	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	мет	5	20.0	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	МЕТ	1	4.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8	
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# NURSING HOME PROFILE WILDWOOD HEALTH CARE CENTER ICF

Street Address:		City and State:	
PO BOX 215		BLACKVILLE SC 29817	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICE	85	PROPRIETARY	08/05/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
85	0	85				
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		FAC	FACILITY STATE		NATION	
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	83	97.6	74.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	79	92.9	79.3	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting.	70	82.4	61.9	63.4	
Transferring						
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	74	87.1	63.3	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	71	83.5	54.5	59.1	
·						
Residents on individually written bowel	and bladder retraining program.	0	0.0	3.6	6.1	
Eating	3. 9					
Residents receiving tube feedings or rec	quiring assistance with eating.	29	34.1	17.7	29.3	
	1 3					
Completely bedfast residents.		0	0.0	0.6	3.6	
Residents confined to chairs.		23	27.1	24.8	39.1	
Residents requiring restraints.		23	27.1	18.6	31.7	
Confused or disoriented residents.		71	83.5	58.2	55.8	
Residents with bed sores.		2	2.4	2.7	4.7	
Residents receiving special skin care.		17	20.0	14.3	24.0	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		ITY NUMBER & PERCENT OF NOT MEETING REOUIF				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6	
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	4	16.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	4	16.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including prodetoctassuragcleanliness, good	MET	2	8.0	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	2	8.0	700	12.8	

32.0

1045

19.1

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			ENT OF FA	FACILITIES EMENTS4.9	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	4	16.0	311	5.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	3	12.0	481	8.8
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	7	28.0	479	8.8
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1064	19.4
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	5	20.0	1169	21.4
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	0	0.0
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	0	0.0	0	0.0
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	0	0.0	0	0.0
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	1	4.0	267	4.9
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	6	24.0	2452	44.8
All common resident areas are clean, sanitary and free of odors.					
All essential mechanical and electrical equipment is maintained in safe operating condition.					
Resident care equipment is clean and maintained in safe operating condition.					
Isolation techniques to prevent the spread of infection are followed by all personnel.					
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.					
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.					
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NURSING HOME PROFILE A SAM KARESH LTC CENTER

Street Address: City and State:

1315 ROBERTS ST CAMDEN SC 29020

Participation: # of Beds: Type of Ownership: Survey Date:

MEDICARE/MEDICAID SNF/ICF 88 LOCAL GOVERNMENT 04/22/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
87	2					
Caution: A large number of residents with these characteristics		FAC	FACILITY STATE		NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	74	85.1	86.1	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	74	85.1	90.6	83.2	
Toileting						
Residents requiring some or total assista	ance in toileting.	81	93.1	82.6	73.8	
Transferring  Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	81	93.1	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	70	80.5	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	32	36.8	45.2	37.7	
Completely bedfast residents.		4	4.6	4.2	3.4	
Residents confined to chairs.		67	77.0	61.6	50.8	
residents commed to chairs.		0.	11.0	0.10		
Residents requiring restraints.		67	77.0	43.9	41.3	
Confused or disoriented residents.		65	74.7	69.6	58.4	
Residents with bed sores.	•	7	8.0	7.0	7.1	
Residents receiving special skin care.		61	70.1	40.8	31.2	

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance witedures regarding the rights and

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responsibilities of residents are followed.	NOT MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individUvresident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements at tactify must meet . There are one of 50 separate requirements. The information presental believe does not rediscret. Proceedings of the problems leading to a delicency. A secondary represents an original problem of an employment of the information present an original problem of an employment of the problems leading to a delicency. A secondary leaves and original problem of an employment of the problems leading to a delicency. A secondary leaves are secondary of the design of the problems leading to a delicency. A secondary leaves are secondary of the delicency of the delicency of the delicency of the delicency. A secondary leaves are delicency of the delicency of the delicency of the delicency. A secondary leaves are available when necessary.  Drugs are administered according to the written orders of the attending physician.  Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended delatery allowances of the Food and Nutrition loard of the National Research Council, National Academy of Sciences.  Services are provided to meet the residents' social and emotional needs by the facility of by referral to an expropriate social agency.  Services are provided to meet the residents' social and emotional needs by the facility of by referral to an expropriate social agency.  Appropriate staff develop and implement a written health care plan for each resident according to the attending physician in accordance with accepted professional practices by qualified therapists of qualified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the residents' social and emotional needs by the facility of by referral to an expropriate social agency.  Appropriate staff develop and implement a written health care plan for each residen	Partiader There 00 along the first transfer to the first transfer to the first transfer transfer to the first transfer t	EA OU ITY			ENT OF FA		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.  Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/licostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident needing assistance in eating or drinking is provided prompt assistance.  Specific self-help devices are available when necessary.  NoT MET 14 12.4 1662 17.6  Drugs are administered according to the written orders of the attending physician.  Merus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended detary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with physicians' orders, and to the extent medically possible, based on the recommended detary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9,7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An acpoing program of meaningful activities is provided, based on identified needs and inferests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  Not MET 1 0.9 1413 14.9  Resident care							
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/leostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.  Not MET 14 12.4 1662 17.6  Drugs are administered according to the written orders of the attending physician.  Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Services are provided to meet the residents' social and emotional needs by the facility or by reterral to an appropriate social agency.  Services are provided to meet the residents' social and emotional needs by the facility or by reterral to an appropriate social agency.  MET 14 12.4 816 8.6  An ongoing program of meaningful activities is provided, based on identified needs and inferests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  Not MET 2 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  Not MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  Not MET 5 4.8,7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.			ST	ATE	NAT	ION	
tubes, collistomy/lieostormy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformitties and paralysis.  NOT MET 35 31.0 2045 21.6  Each resident needing assistance in eating or drinking is provided prompt assistance.  Specific self-help devices are available when necessary.  NOT MET 14 12.4 1662 17.6  Drugs are administered according to the written orders of the attending physician.  Met 40 35.4 2739 29.0  Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Services are provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  MET 11 9,7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  MET 14 12.4 816 8.6  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 2 19,5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 14.9  Resident care equipment is clean and maintained in saf	deliciency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.    NOT MET   14   12.4   1662   17.6	tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	NOT MET	47	41.6	1123	11.9	
Specific self-help devices are available when necessary.  NOT MET 14 12.4 1662 17.6  Drugs are administered according to the written orders of the attending physician.  MET 40 35.4 2739 29.0  Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciencess.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  NOT MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.		NOT MET	35	31.0	2045	21.6	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 5 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.		NOT MET	14	12.4	1662	17.6	
accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  NOT MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 14.9  Resident care equipment is clean and maintained in safe operating condition.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.		MET	40	35.4	2739	29.0	
with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  MET 14 12.4 816 8.6  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  NOT MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the	MET	22	19.5	1389	14.7	
Facility or by referral to an appropriate social agency.  MET 14 12.4 816 8.6  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  NOT MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
and inferests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  NOT MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  NOT MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  NOT MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	and interests of each resident. It is designed to promote opportunities for engaging	MET	8	7.1	1099	11.6	
All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	3	2.7	1216	12.9	
Resident care equipment is clean and maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 6 5.3 1408 14.9  A 8.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and mET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
	The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
	Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

### NURSING HOME PROFILE DRIFTWOOD ON THE ASHLEY

Ditti 1 11000 ON THE ACITE					
Street Address:		City and State:			
2375 BAKER HOSP BLVD		CHARLESTON SC 29405			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE/MEDICAID SNF/ICF	160	PROPRIETARY	04/22/88		

T				
Medicare Residents:	Medicaid Residents:			
159		2		
cteristics does not indicate whether those	FACILITY		STATE	NATION
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		%	%	%
ance in bathing.	147	92.5	86.1	81.5
ance in dressing.	150	94.3	90.6	83.2
ance in toileting.	134	84.3	82.6	73.8
ance moving from bed to chair or to	130	81.8	81.4	77.2
Residents with catheters or partial or total loss of bowel or bladder control.			74.3	68.2
Residents on individually written bowel and bladder retraining program.		4.4	4.2	4.6
Residents receiving tube feedings or requiring assistance with eating.		30.8	45.2	37.7
	4	2.5	4.2	3.4
	116	73.0	61.6	50.8
	58	36.5	43.9	41.3
Confused or disoriented residents.		74.2	69.6	58.4
	11	6.9	7.0	7.1
	36	22.6	40.8	31.2
	ance in bathing.  ance in dressing.  ance in toileting.  ance moving from bed to chair or to  tal loss of bowel or bladder control.  and bladder retraining program.	teteristics does not indicate whether those e. It may reflect the facility's ability to provide  ance in bathing.  147  ance in dressing.  150  ance in toileting.  134  ance moving from bed to chair or to  130  tal loss of bowel or bladder control.  121  and bladder retraining program.  7  quiring assistance with eating.  49  116  58  118	1 99  cteristics does not indicate whether those e. It may reflect the facility's ability to provide # %  ance in bathing. 147 92.5  ance in dressing. 150 94.3  ance in toileting. 134 84.3  ance moving from bed to chair or to 130 81.8  tal loss of bowel or bladder control. 121 76.1  and bladder retraining program. 7 4.4  quiring assistance with eating. 49 30.8  4 2.5  116 73.0  58 36.5  118 74.2	1 92  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility's ability to provide # % %  Interistics does not indicate whether those e. It may reflect the facility should be able to provide # % %  Interistics does not indicate whether those e. It may reflect the facility should be able to provide # % %  Interistics does not indicate the provide # % %  Interistics does not indicate the provide # % %  Interistics does not indicate the provide # % %  Interistics does not indicate the provide # % %  Interistics does not indicate the provide # %  Interistics does

was defined in the indicated area at the time of the survey.					
<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NIAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET				
	10121	#	%	#	%
The facility ensures that its written procedures regarding the rights and					
responsibilities of residents are followed.	AACT	6	5.3	201	2.1
	MET		5.5	201	۷.۱
The facility uses a system that assures full and complete accounting of residents'					
personal funds. An accounting report is made to each resident in a skilled nursing				,	
facility every three months.	NOT MET	13	11.5	518	5.5
Fach resident is free from montal and physical abuse					
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a					
physician in writing for a specified period of time or in emergencies.		3	2.7	806	8.5
	MET		2.7	000	0.5
Each resident is given privacy during treatment and care of personal needs.	MET	0.4	20.1	1610	171
		34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with		_			
individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing					
as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is					
treatment changed radically, without consultation with the resident or, if the resident	MET	0	0.0	30	0.3
is incompetent, without prior notification of next of kin or sponsor.	IVIEI		0.0		0.0
The facility encurse that the health care of each resident is under the centinging					
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		0	0.0	1 4 5	4.5
supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident		_			
who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.					
	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good					
skin care, good grooming, and oral hygiene taking into account individual	MET	29	25.7	2816	29.8
preferences. Residents are encouraged to take care of their own self care needs.			-		
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the	MET	22	19.5	1052	11.1
bed sore including proper dressing.	IVIE		10.0	1002	11.1
Each resident who has problems with bowel and bladder control is provided with					
care necessary to encourage self control, including frequent toileting and		00	00.0	1510	40.0
opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic					
evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NOT	MEETING	REOUIREMENTS		
below does not reflect the severity or the duration of the prob			ATE		ION	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	NUMBE	31.0	2045	CILITIES 21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE MANOR CARE OF CHARLESTON INC

Street Address:		City and State:	
1137 SAM RITTENBURG DRIVE		CHARLESTON SC 29407	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	132	PROPRIETARY	04/13/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
93	14	8			
Caution: A large number of residents with these characteristics.	· ·	FACILITY		STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	88	94.6	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	80	86.0	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	76	81.7	82.6	73.8
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	81	87.1	81.4	77.2
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.		83	89.2	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	6	6.5	4.2	4.6
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	54	58.1	45.2	37.7
Completely bedfast residents.		4	4.3	4.2	3.4
Residents confined to chairs.		42	45.2	61.6	50.8
Residents requiring restraints.		28	30.1	43.9	41.3
Confused or disoriented residents.		44	47.3	69.6	58.4
Residents with bed sores.		15	16.1	7.0	7.1
Residents receiving special skin care.		37	39.8	40.8	31.2

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	NOT MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6
			1		

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	NUMBE	ER & PERCI	ENT OF FA	CILITIES
facility must meet. There are over 500 separate requirements. The information presented	MET/	NOT MEETING REOUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	NOT MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE NORTH CHARLESTON NSG CTR

Street Address:		City and State:	
9319 MEDICAL PLAZA DR		CHARLESTON SC 29405	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	132	PROPRIETARY	08/17/87

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
130	1	103			
Caution: A large number of residents with these characteristics		FACILITY		STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	115	88.5	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	121	93.1	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	121	93.1	82.6	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	113	86.9	81.4	77.2
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.			81.5	74.3	68.2
Residents on individually written bowel and bladder retraining program.		10	7.7	4.2	4.6
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	63	48.5	45.2	37.7
Completely bedfast residents.		11	8.5	4.2	3.4
Residents confined to chairs.		82	63.1	61.6	50.8
Residents requiring restraints.		100	76.9	43.9	41.3
Confused or disoriented residents.		97	74.6	69.6	58.4
Residents with bed sores.		6	4.6	7.0	7.1
Residents receiving special skin care.		18	13.8	40.8	31.2

SILITY ET/ IOT IET  IET	NOT		ENT OF FAC REQUIREMI NAT #	ENTS
IET IET	#	%		
NET NET	#	%		
1ET			#	/6
	6	5.3		
1ET			201	2.1
1ET				
	13	11.5	518	5.5
1ET	0	0.0	168	1.8
1ET	3	2.7	806	8.5
1ET	34	30.1	1618	17.1
1ET	7	6.2	36	0.4
1ET	0	0.0	205	2.2
1ET	0	0.0	30	0.3
1ET	0	0.0	145	1.5
1ET	2	1.8	49	0.5
1ET	11	9.7	508	5.4
1ET	29	25.7	2816	29.8
1ET	35	31.0	1733	18.3
1ET	22	19.5	1052	11.1
	38	33.6	1512	16.0
1ET				
	IET IET IET	1ET 29 1ET 35 1ET 22	11 9.7  11 9.7  11 29 25.7  11 35 31.0  11 22 19.5	11 9.7 508  11 9.7 508  11 29 25.7 2816  11 35 31.0 1733  11 12 19.5 1052

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY			ENT OF FA		
cility must meet. There are over 500 separate requirements. The information presented		NOT MEETING REQUIRE				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		_	TION	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	МЕТ	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	МЕТ	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	МЕТ	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

#### NURSING HOME PROFILE CHERAW NH INC

	OTILITIAN INTO							
Street Address:		City and State:						
HIGHWAY 9		CHERAW SC 29520						
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICARE/MEDICAID SNF/ICF	100	PROPRIETARY	01/21/88					

Total Pacidents on Day of Curvey	Medicare Residents:	Beadia	aid Daai	donto.					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:							
86				69					
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION				
highly specialized care and services.		#	%	%	%				
Bathing									
Residents requiring some or total assista	ance in bathing.	72	83.7	86.1	81.5				
Dressing									
Residents requiring some or total assista	ance in dressing.	76	88.4	90.6	83.2				
Toileting									
Residents requiring some or total assista	ance in toileting.	70	81.4	82.6	73.8				
Transferring									
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	61	70.9	81.4	77.2				
Continence									
Residents with catheters or partial or to	60	69.8	74.3	68.2					
Residents on individually written bowel a	and bladder retraining program.	3	3.5	4.2	4.6				
Eating									
Residents receiving tube feedings or rec	quiring assistance with eating.	34	39.5	45.2	37.7				
Completely bedfast residents.		1	1.2	4.2	3.4				
Residents confined to chairs.		73	84.9	61.6	50.8				
-									
Residents requiring restraints.		43	50.0	43.9	41.3				
Confused or disoriented residents.		61	70.9	69.6	58.4				
Residents with bed sores.		7	8.1	7.0	7.1				
Residents receiving special skin care.		42	48.8	40.8	31.2				

was deficient in the indicated area at the time of the survey.					
acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACIL NOT MEETING REQUIREMEN			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				R & PERCENT OF FACILIT	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	МЕТ	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.		22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	мет	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	МЕТ	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE CHESTER CO NURSING CENTER

Street Address:		City and State:	
GREAT FALLS RD CHESTER SC 29706			
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	62	LOCAL GOVERNMENT	04/29/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
62	0	46				
Caution: A large number of residents with these characteristics are received and appropriate or incorporate are received.		FAC	ILITY	STATE	NATION	
highly specialized care and services.	esidents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide nighly specialized care and services.			%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	56	90.3	86.1	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	59	95.2	90.6	83.2	
Toileting						
Residents requiring some or total assista	ance in toileting.	57	91.9	82.6	73.8	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	57	91.9	81.4	77.2	
Continence						
Residents with catheters or partial or to	43	69.4	74.3	68.2		
Residents on individually written bowel a	and bladder retraining program.	3	4.8	4.2	4.6	
Eating	and bledder retraining program					
Residents receiving tube feedings or rec	nuiring assistance with eating	29	46.8	45.2	37.7	
Treductive receiving table recallings of rec	during accordance with catting.					
Completely bedfast residents.		1	1.6	4.2	3.4	
Residents confined to chairs.		47	75.8	61.6	50.8	
Residents requiring restraints.		13	21.0	43.9	41.3	
Confused or disoriented residents.		46	74.2	69.6	58.4	
Residents with bed sores.		11	17.7	7.0	7.1	
Residents receiving special skin care.		13	21.0	40.8	31.2	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITI NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
ach resident is allowed to retain and use his/her personal possessions and clothing space permits.		0	0.0	205	2.2
eatment changed radically, without consultation with the resident or, if the resident incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				CENT OF FACILITIE REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE CLEMSON AREA RETIREMENT CENTER

OFFINO OLE WITH LIFE IN COLUMN TO THE FILE								
Street Address:		City and State:						
500 DOWNS LOOP		CLEMSON SC 29631						
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICARE SNF	44	PROPRIETARY	03/03/88					

	RESIDENT CHARACTERIST	100				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
42	0		(	)		
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	41	97.6	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	42	100	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	32	76.2	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	24	57.1	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	29	69.0	74.3	68.2	
					1	
Residents on individually written bowel	and bladder retraining program.	3	7.1	4.2	4.6	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	16	38.1	45.2	37.7	
Completely bedfast residents.		1	2.4	4.2	3.4	
Residents confined to chairs.		14	33.3	61.6	50.8	
Residents requiring restraints.		13	31.0	43.9	41.3	
Confused or disoriented residents.		30	71.4	69.6	58.4	
Residents with bed sores.		3	7.1	7.0	7.1	
Residents receiving special skin care.		2	4.8	40.8	31.2	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT MET	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.					
The facility uses a system that assures full and complete accounting of residents'	MET	6	5.3	201	2.1
personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				CENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	TION
deficiency may represent an origonity problem of a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

#### NURSING HOME PROFILE BAIL FY NH

Street Address:		City and State:	
DRAWER 976		CLINTON SC 29325	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	43	NON-PROFIT OTHER	04/22/87

	RESIDENT CHARACTERIST				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
42	0		3	37	
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	35	83.3	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing	39	92.9	90.6	83.2
Toileting	arioe in dressing.	00	02.0	30.0	00.2
Residents requiring some or total assist	ance in toileting.	39	92.9	82.6	73.8
Transferring  Residents requiring some or total assist	anno moving from had to chair or to				
tub or toilet.	ance moving from bed to chair or to	34	81.0	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	40	95.2	74.3	68.2
•					
Residents on individually written bowel	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
•	ruising assistance with seting	24	57.1	45.2	37.7
Residents receiving tube feedings or rec	quilling assistance with eating.			10.2	
		0	0.0	4.2	3.4
Completely bedfast residents.		0	0.0	4.2	3.4
Residents confined to chairs.		31	73.8	61.6	50.8
Residents requiring restraints.		16	38.1	43.9	41.3
Confused or disoriented residents.		14	33.3	69.6	58.4
Table of Globilotton Foliabilities					
Decidents with had care		3	7.1	7.0	7.1
Residents with bed sores.			7.1		
		20	70.0	40.0	01.0
Residents receiving special skin care.		32	76.2	40.8	31.2

was defined in the indicated after all the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	CT	STATE NA		TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.					
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented pelow does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		TY NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
		STATE		NA <sup>-</sup>	TION	
denoted by may represent an ongoing problem of a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE WHITTEN CENTER MEDS

Street Address:		City and State:	
US HWY 76 E DRAWER 239		CLINTON SC 29325	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	111	STATE GOVERNMENT	05/29/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
109	109		106				
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate car highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	109	100	86.1	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	109	100	90.6	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	109	100	82.6	73.8		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	103	94.5	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	108	99.1	74.3	68.2		
Residents on individually written bowel	and bladder retraining program.	17	15.6	4.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	92	84.4	45.2	37.7		
Completely bedfast residents.		6	5.5	4.2	3.4		
Residents confined to chairs.		97	89.0	61.6	50.8		
Residents requiring restraints.		97	89.0	43.9	41.3		
Confused or disoriented residents.		109	100	69.6	58.4		
o							
Residents with bed sores.		3	2.8	7.0	7.1		
THE STATE WITH NEW SOLES.							
Posidente receiving enesial akin es-a		70	64.2	40.8	31.2		
Residents receiving special skin care.		I		1.3.5			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			CILITIES IENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to τake care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	МЕТ	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6
	-		,		

eminder: These 32 selected performance indicators do not represent all the requirements a cility must meet. There are over 500 separate requirements. The information presented		TY NUMBER & PERCENT OF FA NOT MEETING REQUIREM			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
eficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	.2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE BRIAN CTR OF NSG CARE COLUMBIA

Street Address:		City and State:	
2451 FOREST DR		COLUMBIA SC 29204	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	257	PROPRIETARY	09/04/87

	RESIDENT CHARACTERIST	100					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
253	253 5		207				
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	216	85.4	86.1	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	208	82.2	90.6	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	196	77.5	82.6	73.8		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	187	73.9	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	173	68.4	74.3	68.2		
Residents on individually written bowel a	and bladder retraining program.	1	0.4	4.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	137	54.2	45.2	37.7		
Completely bedfast residents.		4	1.6	4.2	3.4		
Residents confined to chairs.		167	66.0	61.6	50.8		
Residents requiring restraints.		101	39.9	43.9	41.3		
Confused or disoriented residents.		112	44.3	69.6	58.4		
Residents with bed sores.		22	8.7	7.0	7.1		
Residents receiving special skin care.		67	26.5	40.8	31.2		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			CILITIES IENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION	
	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FACILITIES REOUIREMENTS	
		STATE		NAT	TION
	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	NOT MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

NURSING HOME PROFILE BRIAN CTR OF NSG CARE ST ANDREWS

Street Address:

3514 SIDNEY RD

COLUMBIA SC 29210

Participation:

# of Beds: Type of Ownership: Survey Date:

MEDICARE/MEDICAID SNF/ICF

120

PROPRIETARY

07/16/87

SELECTEL	RESIDENT CHARACTERIST	105				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
117 6			5	59		
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	112	95.7	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	97	82.9	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	95	81.2	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	114	97.4	81.4	77.2	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.			82.9	74.3	68.2	
Residents on individually written bowel	and bladder retraining program.	1	0.9	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	85	72.6	45.2	37.7	
Completely bedfast residents.		3	2.6	4.2	3.4	
Residents confined to chairs.		73	62.4	61.6	50.8	
•						
Residents requiring restraints.		44	37.6	43.9	41.3	
Confused or disoriented residents.		86	73.5	69.6	58.4	
Residents with bed sores.		3	2.6	7.0	7.1	
Residents receiving special skin care.		86	73.5	40.8	31.2	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	ATE NAT	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6
evaluation.	MET		20.4	1000	17.0

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FA REQUIREM	
		STATE %		+	ION %
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.		6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.		1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity or linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE C M TUCKER HUMAN RESOURCES CTR

Street Address:		City and State:	
2200 HARDEN ST		COLUMBIA SC 29203	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	608	STATE GOVERNMENT	12/18/87

SELECTEL	RESIDENT CHARACTERIST	105				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
575 0			2	290		
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate carr		FAC	ILITY	STATE	NATION	
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	438	76.2	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	461	80.2	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	350	60.9	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	340	59.1	81.4	77.2	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.			68.3	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	45	7.8	4.2	4.6	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	184	32.0	45.2	37.7	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		213	37.0	61.6	50.8	
Residents requiring restraints.		191	33.2	43.9	41.3	
Confused or disoriented residents.		439	76.3	69.6	58.4	
Residents with bed sores.		28	4.9	7.0	7.1	
Residents receiving special skin care.		121	21.0	40.8	31.2	

The state of the s					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.				ENT OF FACILITIES REOUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET/ NOT	27	ATE	NATION	
	MET				
	IVICI	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an engoing problem or a one time failure of a single staff person.				CENT OF FACILITIES REQUIREMENTS	
		S1	TATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	NOT MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8
			1		

# NURSING HOME PROFILE CAPITAL CONVALESCENT CENTER INC

Street Address:		City and State:	
3001 BEECHAVEN RD		COLUMBIA SC 29204	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	PROPRIETARY	02/05/87

	RESIDENT CHARACTERIST							
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:						
119 0			96					
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	100	84.0	86.1	81.5			
Dressing								
Residents requiring some or total assista	ance in dressing.	110	92.4	90.6	83.2			
Toileting	<u> </u>							
Residents requiring some or total assista	ance in toileting.	96	80.7	82.6	73.8			
Transferring								
Residents requiring some or total assistated tub or toilet.	ance moving from bed to chair or to	107	89.9	81.4	77.2			
Continence								
Residents with catheters or partial or total loss of bowel or bladder control.			68.9	74.3	68.2			
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	47	39.5	45.2	37.7			
Completely bedfast residents.		15	12.6	4.2	3.4			
Residents confined to chairs.		98	82.4	61.6	50.8			
Residents requiring restraints.		67	56.3	43.9	41.3			
Confused or disoriented residents.		71	59.7	69.6	58.4			
	-							
Residents with bed sores.		5	4.2	7.0	7.1			
·								
Residents receiving special skin care.		52	43.7	40.8	31.2			
	-			·!				

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
		ST	ATE	NAT	ION	
	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	мет	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

				CENT OF FACILITIES REOUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NA <sup>-</sup>	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE DOWDY GARDNER NSG CARE CTR FARMER BLDG

Street Address:		City and State:	
7901 FARROW RD		COLUMBIA SC 29203	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID SNF/ICF	166	STATE GOVERNMENT	11/20/87

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	,
162	0		1:	38	
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	153	94.4	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	153	94.4	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	147	90.7	82.6	73.8
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	134	82.7	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	146	90.1	74.3	68.2
·					
Residents on individually written bowel a	and bladder retraining program.	3	1.9	4.2	4.6
Eating	<u> </u>				
Residents receiving tube feedings or rec	quiring assistance with eating.	86	53.1	45.2	37.7
	·				
Completely bedfast residents.		11	6.8	4.2	3.4
Residents confined to chairs.		109	67.3	61.6	50.8
Residents requiring restraints.		24	14.8	43.9	41.3
Confused or disoriented residents.		154	95.1	69.6	58.4
Residents with bed sores.		9	5.6	7.0	7.1
Residents receiving special skin care.		133	82.1	40.8	31.2

was delicient in the indicated area at the time of the survey.					
<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the soverity or the duration of the problems leading to a deficiency.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A			STATE		TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	МЕТ	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE DOWDY GARDNER NSG CARE CTR MCCLENDON

			-
Street Address:		City and State:	
7901 FARROW RD		COLUMBIA SC 29203	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID SNF/ICF	132	STATE GOVERNMENT	03/11/88

SELECTED	RESIDENT CHARACTERIST	ICS			
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
120	0		10	00	
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car	cteristics does not indicate whether those		ILITY	STATE	NATION
highly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	117	97.5	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	118	98.3	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	114	95.0	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	92	76.7	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	110	91.7	74.3	68.2
· -					
Residents on individually written bowel	and bladder retraining program.	4	3.3	4.2	4.6
Eating	and other many programm				
Residents receiving tube feedings or re-	quiring assistance with eating	78	65.0	45.2	37.7
Tresidente receiving table recailings of rec	quining assistance with catting.				
Completely bedfast residents.		0	0.0	4.2	3.4
Completely bearast residents.		-			
Desidents confined to chaire		76	63.3	61.6	50.8
Residents confined to chairs.		70	00.0	01.0	
Parishan and the second state of		43	35.8	43.9	41.3
Residents requiring restraints.		40	33.0	40.0	41.0
		444	00.5	69.6	58.4
Confused or disoriented residents.		111	92.5	09.6	58.4
				7.0	7.4
Residents with bed sores.		7	5.8	7.0	7.1
Residents receiving special skin care.		108	90.0	40.8	31.2

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ГАТЕ	NA <sup>-</sup>	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

eminder: These 32 selected performance indicators do not represent all the requirements a cility must meet. There are over 500 separate requirements. The information presented glow does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	017112		NAT	TON
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE MANOR CARE

2601 FOREST DR COLUMBIA SC 29204			
Street Address:		City and State:	
2601 FOREST DR		COLUMBIA SC 29204	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	118	PROPRIETARY	01/22/88

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
104	5			5	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	89	85.6	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	93	89.4	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	76	73.1	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	71	68.3	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	46	44.2	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	3	2.9	4.2	4.6
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	37	35.6	45.2	37.7
Completely bedfast residents.		7	6.7	4.2	3.4
Residents confined to chairs.		53	51.0	61.6	50.8
				10.0	44.0
Residents requiring restraints.		27	26.0	43.9	41.3
		00	00.0	60.6	EQ 4
Confused or disoriented residents.		28	26.9	69.6	58.4
Desidents with had cover		3	2.9	7.0	7.1
Residents with bed sores.					
Decidents receiving energy skin sere		3	2.9	40.8	31.2
Residents receiving special skin care.					

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
		STATE		NATION	
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A		ST	ATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE MARY E WHITE DEVELOPMENTAL CTR

Street Address:		City and State:			
8301 FARROW RD		COLUMBIA SC 29203			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE/MEDICAID SNF/ICF	112	STATE GOVERNMENT	01/20/88		

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
101	2	98				
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	98	97.0	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	97	96.0	90.6	83.2	
Toileting	<u> </u>					
Residents requiring some or total assist	ance in toileting.	94	93.1	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	90	89.1	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	94	93.1	74.3	68.2	
Residents on individually written bowel	and bladder retraining program.	13	12.9	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	83	82.2	45.2	37.7	
Completely bedfast residents.		5	5.0	4.2	3.4	
Residents confined to chairs.		96	95.0	61.6	50.8	
Residents requiring restraints.		53	52.5	43.9	41.3	
Confused or disoriented residents.		100	99.0	69.6	58.4	
		7	6.0	7.0	7.4	
Residents with bed sores.		/	6.9	7.0	7.1	
		101	100	40.9	21.0	
Residents receiving special skin care.		101	100	40.8	31.2	

was delicient in the indicated area at the time of the survey.					
<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
		STATE		NAT	TION
		#	1 %	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0 ·	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Deficiency may represent an ongoing problem or a one-time failure of a single staff person.  Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.  Drugs are administered according to the written orders of the attending physician.  Menus are planned and followed to meet the nutritional needs of each resident in	MET  OT MET	47	41.6 31.0	NAT #	11.9
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.  Drugs are administered according to the written orders of the attending physician.  Menus are planned and followed to meet the nutritional needs of each resident in	MET OT MET	47 35	41.6	1123	
tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.  Drugs are administered according to the written orders of the attending physician.  Menus are planned and followed to meet the nutritional needs of each resident in	ОТ МЕТ	35			11.9
functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident needing assistance in eating or drinking is provided prompt assistance.  Specific self-help devices are available when necessary.  Drugs are administered according to the written orders of the attending physician.  Menus are planned and followed to meet the nutritional needs of each resident in			31.0	2045	
Drugs are administered according to the written orders of the attending physician.  Menus are planned and followed to meet the nutritional needs of each resident in	MET	1.4			21.6
Menus are planned and followed to meet the nutritional needs of each resident in		14	12.4	1662	17.6
	MET	40	35.4	2739	29.0
accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the	ОТ МЕТ	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	ОТ МЕТ	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	ОТ МЕТ	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	OT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	ОТ МЕТ	41	36.3	4050	42.8

# NURSING HOME PROFILE RICHLAND CONVALESCENT CENTER

	11001110 9911111		
Street Address:		City and State:	
4112 HARTFORD ST		COLUMBIA SC 29204	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	152	PROPRIETARY	07/09/87

	RESIDENT CHARACTERIST	100					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
147	147		142				
Caution: A large number of residents with these characteristicates are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION		
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	127	86.4	74.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	130	88.4	79.3	76.7		
Toileting							
Residents requiring some or total assista	ance in toileting.	99	67.3	61.9	63.4		
Transferring							
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	119	81.0	63.3	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	99	67.3	54.5	59.1		
Residents on individually written bowel a	and bladder retraining program.	3	2.0	3.6	6.1		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	11	7.5	17.7	29.3		
Completely bedfast residents.		1	0.7	0.6	3.6		
Residents confined to chairs.		41	27.9	24.8	39.1		
Residents requiring restraints.		22	15.0	18.6	31.7		
Confused or disoriented residents.		114	77.6	58.2	55.8		
Residents with bed sores.		3	2.0	2.7	4.7		
Residents receiving special skin care.		11	7.5	14.3	24.0		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FAC NOT MEETING REQUIREME			
		MET/ NOT ST		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.		0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	МЕТ	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NATION	
		#	% ATE	# NAT	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	МЕТ	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	NOT MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	мет	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	МЕТ	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	МЕТ	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

## NURSING HOME PROFILE WOODROW ICF

Street Address:		City and State:	-
1625 COLLEGE STREET		COLUMBIA SC 29208	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	8	STATE GOVERNMENT	09/23/87

SELECTED	RESIDENT CHARACTERIST	ICS				
Total Residents on Day of Survey:	Medicare Residents:	dents: Medicaid Residents:				
7 0 7			7			
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION	
highly specialized care and services.	e. It may renect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	7	100	74.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	7	100	79.3	76.7	
Toileting						
Residents requiring some or total assista	ance in toileting.	7	100	61.9	63.4	
Transferring Residents requiring some or total assista	ance moving from had to chair or to					
tub or toilet.	ance moving from bed to chair of to	7	100	63.3	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	7	100	54.5	59.1	
Residents on individually written bowel a	and bladder retraining program.	6	85.7	3.6	6.1	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	7	100	17.7	29.3	
Completely bedfast residents.		0	0.0	0.6	3.6	
Residents confined to chairs.		7	100	24.8	39.1	
Residents requiring restraints.		3	42.9	18.6	31.7	
Confused or disoriented residents.		0	0.0	58.2	55.8	
				-		
Residents with bed sores.		3	42.9	2.7	4.7	
Residents receiving special skin care.		7	100	14.3	24.0	
			•			

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A			R & PERCI MEETING		
	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	NOT MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

eminder: These 32 selected performance indicators do not represent all the requirements a cility must meet. There are over 500 separate requirements. The information presented blow does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCE NOT MEETING STATE		REQUIREM	IENTS
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	#	%	#	rion %
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	мет	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	мет	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

## NURSING HOME PROFILE CONWAY NURSING CTR

,		71101110 0 1 1 1	
Street Address:		City and State:	
3300 4TH AVE		CONWAY SC 29526	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	174	PROPRIETARY	03/25/88

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
140	2	79			
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	140	100	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	140	100	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	140	100	82.6	73.8
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	139	99.3	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	136	97.1	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	13	9.3	4.2	4.6
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	67	47.9	45.2	37.7
Completely bedfast residents.		15	10.7	4.2	3.4
Residents confined to chairs.		98	70.0	61.6	50.8
Residents requiring restraints.		65	46.4	43.9	41.3
Confused or disoriented residents.		132	94.3	69.6	58.4
Residents with bed sores.		6	4.3	7.0	7.1
Residents receiving special skin care.		109	77.9	40.8	31.2

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented applying the problems leading to a deficiency.				ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem of a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	мет	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	мет	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	мет	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	<b>5</b> 5	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

# NURSING HOME PROFILE DARLINGTON CONV CTR

 Street Address:
 City and State:

 352 PEARL ST
 DARLINGTON SC 29532

 Participation:
 # of Beds:
 Type of Ownership:
 Survey Date:

 MEDICAID ICF
 44
 PROPRIETARY
 01/15/88

SELECTEL	RESIDENT CHARACTERIST	ICS				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
42	0	29				
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	32	76.2	74.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	31	73.8	79.3	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting.	20	47.6	61.9	63.4	
Transferring					-	
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	21	50.0	63.3	66.0	
Continence						
Residents with catheters or partial or to	11	26.2	54.5	59.1		
Residents on individually written bowel a	and bladder retraining program.	2	4.8	3.6	6.1	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	4	9.5	17.7	29.3	
Completely bedfast residents.		0	0.0	0.6	3.6	
Residents confined to chairs.		6	14.3	24.8	39.1	
Residents requiring restraints.		7	16.7	18.6	31.7	
Confused or disoriented residents.		4	9.5	58.2	55.8	
Residents with bed sores.		0	0.0	2.7	4.7	
Residents receiving special skin care.		0	0.0	14.3	24.0	
residents receiving special skill care.						

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

eminder: These 32 selected performance indicators do not represent all the requirements a cility must meet. There are over 500 separate requirements. The information presented glow does not reflect the severity or the duration of the problems leading to a deficiency. A efficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACT NOT MEETING REQUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deliciency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	, 748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

## NURSING HOME PROFILE OAKHAVEN INC

	<u> </u>		
Street Address:		City and State:	
131 OAK ST		DARLINGTON SC 29532	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	01/13/88

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
86	1	63			
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate callingly specialized care and services.	re. It may reflect the facility's ability to provide	#	%	%	%
Bathing	*				
Residents requiring some or total assis	tance in bathing.	60	69.8	86.1	81.5
Dressing					
Residents requiring some or total assis	tance in dressing.	71	82.6	90.6	83.2
Toileting					
Residents requiring some or total assis	tance in toileting.	72	83.7	82.6	73.8
Transferring					
Residents requiring some or total assistub or toilet.	tance moving from bed to chair or to	72	83.7	81.4	77.2
Continence					
Residents with catheters or partial or to	otal loss of bowel or bladder control.	63	73.3	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	4	4.7	4.2	4.6
Eating					
Residents receiving tube feedings or re	quiring assistance with eating.	38	44.2	45.2	37.7
Completely bedfast residents.		9	10.5	4.2	3.4
Residents confined to chairs.		48	55.8	61.6	50.8
Residents requiring restraints.		54	62.8	43.9	41.3
Confused or disoriented residents.		48	55.8	69.6	58.4
Residents with bed sores.		6	7.0	7.0	7.1
Residents receiving special skin care.		56	65.1	40.8	31.2

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILIT NOT MEETING REOUIREMENTS				
elow does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT			NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF NOT MEETING REQUIR				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	S1	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

08/12/87

# NURSING HOME PROFILE PINES NURSING CONV HOME

Street Address:

203 LAKESIDE DRIVE

DILLON SC 29536

Participation:

# of Beds: Type of Ownership: Survey Date:

MEDICARE/MEDICAID SNF/ICF 84 PROPRIETARY

RESIDENT CHARACTERIST	103				
Medicare Residents:	Medic	aid Resid	dents:		
0		5	9		
cteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
e. It may reflect the facility's ability to provide	#	%	%	%	
ance in bathing.	64	79.0	86.1	81.5	
ance in dressing.	72	88.9	90.6	83.2	
ance in toileting.	69	85.2	82.6	73.8	
-				-	
ance moving from bed to chair or to	66	81.5	81.4	77.2	
tal loss of bowel or bladder control.	65	80.2	74.3	68.2	
and bladder retraining program	1	1.2	4.2	4.6	
and bladder retraining program.					
guiring assistance with eating	46	56.8	45.2	37.7	
quilling accordance with catting.					
	6	7.4	4.2	3.4	
	34	42.0	61.6	50.8	
	37	45.7	43.9	41.3	
		10.7	10.0		
	74	91 4	69.6	58.4	
	/4	31.4	00.0	00.7	
	Q	2.7	7.0	7.1	
	3	3.7	7.0	/.1	
	0.1	100	40.9	31.2	
	01	100	40.0	31.2	
	Medicare Residents:	Medicare Residents:  0  cteristics does not indicate whether those e. It may reflect the facility's ability to provide  ance in bathing.  64  ance in dressing.  72  ance in toileting.  69  ance moving from bed to chair or to  66  tal loss of bowel or bladder control.  65  and bladder retraining program.  1	Medicare Residents:  0 5 cteristics does not indicate whether those e. It may reflect the facility's ability to provide  ance in bathing.  64 79.0  ance in dressing.  72 88.9  ance in toileting.  69 85.2  ance moving from bed to chair or to  66 81.5  tal loss of bowel or bladder control.  65 80.2  and bladder retraining program.  1 1.2  quiring assistance with eating.  64 7.4  34 42.0  37 45.7  74 91.4	Medicare Residents:         Medicaid Residents:           0         59           cteristics does not indicate whether those e. It may reflect the facility's ability to provide         FACILITY         STATE           #         %         %           ance in bathing.         64         79.0         86.1           ance in dressing.         72         88.9         90.6           ance in toileting.         69         85.2         82.6           ance moving from bed to chair or to         66         81.5         81.4           tal loss of bowel or bladder control.         65         80.2         74.3           and bladder retraining program.         1         1.2         4.2           quiring assistance with eating.         46         56.8         45.2           34         42.0         61.6           37         45.7         43.9           74         91.4         69.6           3         3.7         7.0	

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the society of the problems leading to a deficiency.				ENT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		ER & PERC MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ГАТЕ	NA-	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

### NURSING HOME PROFILE BLUE RIDGE CARE CENTER ICF

Street Address:		City and State:	
ROUTE 7 BOX 408		EASLEY SC 29640	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	67	PROPRIETARY	07/02/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
63	0		51			
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	34	54.0	74.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	46	73.0	79.3	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting.	30	47.6	61.9	63.4	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	17	27.0	63.3	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	32	50.8	54.5	59.1	
Residents on individually written bowel	and bladder retraining program.	0	0.0	3.6	6.1	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	7	11.1	17.7	29.3	
Completely bedfast residents.		0	0.0	0.6	3.6	
Residents confined to chairs.		5	7.9	24.8	39.1	
Residents requiring restraints.		11	17.5	18.6	31.7	
Confused or disoriented residents.	40.	28	44.4	58.2	55.8	
Residents with bed sores.		2	3.2	2.7	4.7	
					0.10	
Residents receiving special skin care.		12	19.0	14.3	24.0	

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<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A	FACILITY MET/	NUMBER & PERCENT OF F NOT MEETING REOUIRE				
	NOT	57	ATE	NA-	ΓΙΟΝ	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
	1112	#	70	#	70	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.				65	1.0	
	MET	0	0.0	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6	
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	мет	2	8.0	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	10	40.0	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented					T OF FACILITIES EQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	02		NAT		
——————————————————————————————————————	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8	

# NURSING HOME PROFILE EASLEY HEALTH CARE INC

Street Address:		City and State:	
200 ANNE DR		EASLEY SC 29640	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	103	PROPRIETARY	07/09/87

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
101					
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	78	77.2	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	93	92.1	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	85	84.2	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	85	84.2	81.4	77.2
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.		85	84.2	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	6	5.9	4.2	4.6
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	39	38.6	45.2	37.7
Completely bedfast residents.		3	3.0	4.2	3.4
Residents confined to chairs.		64	63.4	61.6	50.8
Residents requiring restraints.		72	71.3	43.9	41.3
Confused or disoriented residents.		67	66.3	69.6	58.4
Residents with bed sores.		13	12.9	7.0	7.1
Residents receiving special skin care.		101	100	40.8	31.2
			1		-

# SELECTED PERFORMANCE INDICATORS "Facility" column indicates deficiencies found at the roblems leading to a deficiency. A

		NUMBER & PERCENT OF I				
	NOT	ST	ATE	NAT	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

eminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented				PERCENT OF FACILITIES REQUIREMENTS	
pelow does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		TALA	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.0
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.0
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE EDGEFIELD HEALTH CARE CENTER ICF

Street Address:		City and State:				
1 MEDICAL PARK DR		EDGEFIELD SC 29824				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICF	81	PROPRIETARY	11/20/87			

Total Residents on Day of Survey:	Medicare Residents:	Medicald Residents:				
81	0	67				
Caution: A large number of residents with these characteristics			HLITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	57	70.4	74.2	78.3	
Dressing						
Residents requiring some or total assista	ance in dressing.	46	56.8	79.3	76.7	
Toileting	3					
Residents requiring some or total assista	ance in toileting.	46	56.8	61.9	63.4	
Transferring						
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	49	60.5	63.3	66.0	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.			43.2	54.5	59.1	
Residents on individually written bowel a	and bladder retraining program.	0	0.0	3.6	6.1	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	10	12.3	17.7	29.3	
Completely bedfast residents.		0	0.0	0.6	3.6	
		21	25.9	24.8	39.1	
Residents confined to chairs.		21	20.0	24.0	55.1	
Residents requiring restraints.		16	19.8	18.6	31.7	
, teoriae ito quining reoti anno.						
Confused or disoriented residents.		30	37.0	58.2	55.8	
Residents with bed sores.		2	2.5	2.7	4.7	
				44.0	0.1.0	
Residents receiving special skin care.		9	11.1	14.3	24.0	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

## NURSING HOME PROFILE STILES M HARPER CONVALESCENT CENTER

Street Address:	eet Address: City and State:				
P O BOX 386		ESTILL SC 29918			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICAID ICF	44	LOCAL GOVERNMENT	06/12/87		

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:								
•								
39  Caution: A large number of residents with these chara	O staristics does not indicate whether these	34		NATION				
residents are receiving appropriate or inappropriate car		de		NATION %				
highly specialized care and services.  Bathing		"	/~	/	,,,			
	ance in bathing	29	74.4	74.2	78.3			
Residents requiring some or total assist  Dressing	ance in batting.	29	74.4	74.2	76.3			
•								
Residents requiring some or total assist	ance in dressing.	30	76.9	79.3	76.7			
Toileting								
Residents requiring some or total assist	ance in toileting.	19	48.7	61.9	63.4			
Transferring								
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	22	56.4	63.3	66.0			
Continence								
Residents with catheters or partial or total loss of bowel or bladder control.			48.7	54.5	59.1			
nesidents with catheters of partial of to	tal loss of bowel of bladder control.	19	40.7	34.5	33.1			
Residents on individually written bowel and bladder retraining program.		0	0.0	3.6	6.1			
Eating								
Residents receiving tube feedings or re-	quiring assistance with eating.	6	15.4	17.7	29.3			
Completely bedfast residents.		0	0.0	0.6	3.6			
Residents confined to chairs.		10	25.6	24.8	39.1			
nesidents commed to chars.								
		4	10.3	18.6	31.7			
Residents requiring restraints.		4	10.3	10.0	31.7			
Confused or disoriented residents.		25	64.1	58.2	55.8			
Residents with bed sores.		1	2.6	2.7	4.7			
Residents receiving special skin care.		7	17.9	14.3	24.0			
residents receiving special skill care.								

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE MEETING I		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE		ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE			TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	NOT MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

# NURSING HOME PROFILE JOHN EDWARD HARTER NURSING CENTER

Street Address:  PO BOX 218 HIGHWAY 278  City and State:  FAIRFAX SC 29827  Participation:  # of Beds: Type of Ownership: Survey Date:			
Street Address:		City and State:	
PO BOX 218 HIGHWAY 278		FAIRFAX SC 29827	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	44	LOCAL GOVERNMENT	10/20/87

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:							
42	0	33					
Caution: A large number of residents with these characteristics			ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assista	ance in bathing.	35	83.3	86.1	81.5		
Dressing							
Residents requiring some or total assista	ance in dressing.	40	95.2	90.6	83.2		
Toileting							
Residents requiring some or total assista	ance in toileting.	30	71.4	82.6	73.8		
Transferring							
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	34	81.0	81.4	77.2		
Continence							
Residents with catheters or partial or total loss of bowel or bladder control.			71.4	74.3	68.2		
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	10	23.8	45.2	37.7		
Completely bedfast residents.		0	0.0	4.2	3.4		
Residents confined to chairs.		33	78.6	61.6	50.8		
Residents requiring restraints.		14	33.3	43.9	41.3		
Confused or disoriented residents.		24	57.1	69.6	58.4		
Residents with bed sores.		5	11.9	7.0	7.1		
Residents receiving special skin care.		5	11.9	40.8	31.2		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACIL NOT MEETING REOUIREMEN			
		STATE		NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				R & PERCENT OF FACI MEETING REOUIREMEN	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/	STATE		1	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	1 %	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
Ail common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	NOT MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

#### NURSING HOME PROFILE COMMANDER NH

Street Address:		City and State:			
ROUTE 3		FLORENCE SC 29501			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE/MEDICAID SNE/ICE	133	PROPRIETARY	12/03/87		

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
132	0		8	6			
Caution: A large number of residents with these characresidents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION		
highly specialized care and services.	e. It may renect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	118	89.4	86.1	81.5		
Dressing							
Residents requiring some or total assista	ance in dressing.	123	93.2	90.6	83.2		
Toileting							
Residents requiring some or total assista	ance in toileting.	119	90.2	82.6	73.8		
Transferring							
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	120	90.9	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	102	77.3	74.3	68.2		
·							
Residents on individually written bowel a	and bladder retraining program.	4	3.0	4.2	4.6		
Eating	3, 3						
Residents receiving tube feedings or rec	quiring assistance with eating.	87	65.9	45.2	37.7		
Completely bedfast residents.		7	5.3	4.2	3.4		
Residents confined to chairs.		77	58.3	61.6	50.8		
-							
Residents requiring restraints.		106	80.3	43.9	41.3		
Confused or disoriented residents.		112	84.8	69.6	58.4		
Residents with bed sores.		1	0.8	7.0	7.1		
Residents receiving special skin care.		79	59.8	40.8	31.2		

A FACILITY MET/ NOT MET  MET  MET	ТОИ	ER & PERC MEETING TATE % 5.3	REQUIREM	
MET MET	6	5.3	#	%
MET	6	5.3		
MET			201	2.1
	13	11.5		
MET			518	5.5
	0	0.0	168	1.8
NOT MET	3	2.7	806	8.5
NOT MET	34	30.1	1618	17.1
MET	7	6.2	36	0.4
MET	0	0.0	205	2.2
MET	0	0.0	30	0.3
MET	0	0.0	145	1.5
MET	2	1.8	49	0.5
MET	11	9.7	508	5.4
MET	29	25.7	2816	29.8
MET	35	31.0	1733	18.3
MET	22	19.5	1052	11.1
MET	38	33.6	1512	16.0
MET	23	20.4	1665	17.6
	NOT MET  MET  MET  MET  MET  MET  MET  MET	NOT MET 34  NOT MET 7  MET 7  MET 0  MET 0  MET 2  MET 11  MET 29  MET 35  MET 35  MET 38	NOT MET 34 30.1  NOT MET 7 6.2  9 MET 0 0.0  MET 0 0.0  MET 0 0.0  MET 2 1.8  MET 11 9.7  MET 29 25.7  MET 35 31.0  MET 22 19.5  MET 38 33.6	NOT MET 3 2.7 806  NOT MET 34 30.1 1618  MET 7 6.2 36  MET 0 0.0 205  MET 0 0.0 30  MET 0 0.0 145  MET 2 1.8 49  MET 11 9.7 508  MET 29 25.7 2816  MET 35 31.0 1733  MET 22 19.5 1052  MET 38 33.6 1512

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NA-	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE FAITH HEALTH CARE FACILITY

Street Address:		City and State:	
617 W MARION ST BOX 690		FLORENCE SC 29503	₽ţr
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	148	PROPRIETARY	12/10/87

SELECTE	RESIDENT CHARACTERIST	103						
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:						
109			109					
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	98	89.9	86.1	81.5			
Dressing								
Residents requiring some or total assist	ance in dressing.	104	95.4	90.6	83.2			
Toileting								
Residents requiring some or total assist	ance in toileting.	92	84.4	82.6	73.8			
Transferring								
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	78	71.6	81.4	77.2			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	81	74.3	74.3	68.2			
Residents on individually written bowel	and bladder retraining program.	3	2.8	4.2	4.6			
Eating								
Residents receiving tube feedings or re-	quiring assistance with eating.	42	38.5	45.2	37.7			
Completely bedfast residents.		3	2.8	4.2	3.4			
Residents confined to chairs.		73	67.0	61.6	50.8			
Residents requiring restraints.		23	21.1	43.9	41.3			
Confused or disoriented residents.		70	64.2	69.6	58.4			
			40.4	7.0	7 4			
Residents with bed sores.		11	10.1	7.0	7.1			
		40	00.7	40.0	01.0			
Residents receiving special skin care.		40	36.7	40.8	31.2			

The deficient in the indedict area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			CENT OF FACILITIES REOUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	OT STATE		ATE NAT		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	NOT MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			CENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE FLORENCE CONV CTR

TEONENCE CONV CIN							
Street Address:		City and State:					
RT 8 BOX 134		FLORENCE SC 29501					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICAID ICF	88	PROPRIETARY	09/23/87				

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Resident			
87	0	67			
Caution: A large number of residents with these char		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate can highly specialized care and services.	are. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assis	stance in bathing.	82	94.3	74.2	78.3
Dressing					
Residents requiring some or total assis	stance in dressing.	87	100	79.3	76.7
Toileting					
Residents requiring some or total assis	stance in toileting.	43	49.4	61.9	63.4
Transferring					
Residents requiring some or total assistub or toilet.	stance moving from bed to chair or to	57	65.5	63.3	66.0
Continence					
Residents with catheters or partial or t	otal loss of bowel or bladder control.	50	57.5	54.5	59.1
·					
Residents on individually written bowel	and bladder retraining program.	0	0.0	3.6	6.1
Eating	3,13				
Residents receiving tube feedings or re	equiring assistance with eating.	27	31.0	17.7	29.3
Completely bedfast residents.		0	0.0	0.6	3.6
Residents confined to chairs.		8	9.2	24.8	39.1
Residents requiring restraints.		19	21.8	18.6	31.7
Confused or disoriented residents.		87	100	58.2	55.8
Residents with bed sores.		1	1.1	2.7	4.7
Residents receiving special skin care.		13	14.9	14.3	24.0

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCI MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	МЕТ	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	6	24.0	2452	44.8

# NURSING HOME PROFILE FOLK NURSING CENTER

Street Address:		City and State:	
ROUTE 9 BOX 64		FLORENCE SC 29501	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	12/04/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
85	0		56		
Caution: A large number of residents with these characteristics does not indicate whether those		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	73	85.9	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	71	83.5	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	62	72.9	82.6	73.8
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	61	71.8	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	49	57.6	74.3	68.2
•					
Residents on individually written bowel	and bladder retraining program.	3	3.5	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	33	38.8	45.2	37.7
	•				
Completely bedfast residents.		0	0.0	4.2	3.4
Residents confined to chairs.		39	45.9	61.6	50.8
Residents requiring restraints.		46	54.1	43.9	41.3
Confused or disoriented residents.		44	51.8	69.6	58.4
Residents with bed sores.		6	7.1	7.0	7.1
Residents receiving special skin care.		71	83.5	40.8	31.2

eminder: These 32 selected performance indicators do not represent all the requirements a cility must meet. There are over 500 separate requirements. The information presented		Y NUMBER & PERCENT OF NOT MEETING REQUIR				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	STATE		ΓΙΟΝ	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	мет	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		T/ NOT MEETING		CENT OF FACILITIES REQUIREMENTS	
	NOT	STATE		NAT	ION
deficiency may represent an origonity problem of a one-time failure of a single stan person.	MÉT	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	мет	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

08/26/87

NURSING HOME PROFILE HEALTHSOUTH REHABILITATION CTR

Street Address:City and State:722 S DARGAN STFLORENCE SC 29501Participation:# of Beds: Type of Ownership: Survey Date:

#### SELECTED RESIDENT CHARACTERISTICS

88

PROPRIETARY

MEDICARE/MEDICAID SNF/ICF

SELECTEL	RESIDENT CHARACTERIST	105					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
57	42	2			42		
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	27	47.4	86.1	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	46	80.7	90.6	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	55	96.5	82.6	73.8		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	49	86.0	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	34	59.6	74.3	68.2		
Residents on individually written bowel a	and bladder retraining program.	11	19.3	4.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	33	57.9	45.2	37.7		
Completely bedfast residents.		0	0.0	4.2	3.4		
Residents confined to chairs.		56	98.2	61.6	50.8		
=							
Residents requiring restraints.		20	35.1	43.9	41.3		
Confused or disoriented residents.		16	28.1	69.6	58.4		
Residents with bed sores.		5	8.8	7.0	7.1		
Residents receiving special skin care.		57	100	40.8	31.2		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			NUMBER & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET/ NOT	STATE		NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

## NURSING HOME PROFILE HERITAGE HOME OF FLORENCE INC

Street Address:		City and State:	
515 S WARLEY ST		FLORENCE SC 29501	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	44	PROPRIETARY	04/08/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
43	0	23			
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing	41	95.3	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing	43	100	90.6	83.2
Toileting	arioo iii arooonig.	10	100		00.2
Residents requiring some or total assista	ance in toileting.	39	90.7	82.6	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	38	88.4	81.4	77.2
Continence					
Residents with catheters or partial or tot	29	67.4	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	4	9.3	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	23	53.5	45.2	37.7
Completely bedfast residents.		4	9.3	4.2	3.4
Residents confined to chairs.		28	65.1	61.6	50.8
Residents requiring restraints.		27	62.8	43.9	41.3
Confused or disoriented residents.		34	79.1	69.6	58.4
Residents with bed sores.		2	4.7	7.0	7.1
Residents receiving special skin care.		16	37.2	40.8	31.2

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A			R & PERCENT OF FA			
		STATE		NAT		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	
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below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency A deficiency may represent an ongoing problem or a one-time failure of a single staff person.  Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/fleostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident needing assistance in eating or drinking is provided prompt assistance.  Specific self-help devices are available when necessary.  Drugs are administered according to the written orders of the attending physician.  MET 14 12.4 1662 1:  Drugs are administered according to the written orders of the attending physician.  MET 40 35.4 2739 2:  Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians orders, and to the extent medically possible, based on the recommended dictary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified needs and interests of each resident. It is designed to promote apportunities for engaging in normal pursuits, including religious activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 4 1.0.9 1413 1.  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 1.	Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.  Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy, respiratory (breathing) and trachectomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident needing assistance in eating or drinking is provided prompt assistance.  Specific self-help devices are available when necessary.  MET 14 12.4 1662 1:  Drugs are administered according to the written orders of the attending physician.  MET 40 35.4 2739 2:  Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended delary allowances of the Pood and Nutrition Board of the National Research Council, National Academy of Sciences.  Firefacy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 8 7.1 1099 1:  All common resident areas are clean, sanitary, and free of odors.  MET 6 5.3 1041 1:  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 1.		3 1				
tubes, colostomy/lieostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident needing assistance in eating or drinking is provided prompt assistance.  Specific self-help devices are available when necessary.  MET 14 12.4 1662 1.  Drugs are administered according to the written orders of the attending physician.  MET 40 35.4 2739 25  Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 4  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 3 2.7 1216 1:  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 6 5.3 1041 1:  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 1:  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1408 1.		3 L				%
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.  Drugs are administered according to the written orders of the attending physician.  MET 14 12.4 1662 1:  Drugs are administered according to the written orders of the attending physician.  MET 40 35.4 2739 2:  MET 41 12.4 816 3:  MET 41 12.4 816 3:  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 22 19.5 1270 1:  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 6 5.3 1041 1:  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 1:  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1408 1:	tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	MET	47	41.6	1123	11.9
Specific self-help devices are available when necessary.  MET 14 12.4 1662 1:  Drugs are administered according to the written orders of the attending physician.  MET 40 35.4 2739 2:  Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 3 2.7 1216 1:  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 6 5.3 1041 1:  All common resident areas are clean, sanitary and free of odors.  MET 1 0.9 1413 1:  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 1:		NOT MET	35	31.0	2045	21.6
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  MET 22 19.5 1389 1. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 1. Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 22 19.5 1270 1. Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 1. All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 1. All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 1. All essential mechanical and maintained in safe operating condition.		MET	14	12.4	1662	17.6
accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 22 19.5 1270 1:  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 1:  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 1:  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 1:  Resident care equipment is clean and maintained in safe operating condition.	Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 6  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 22 19.5 1270 13  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 13  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 13  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 14	accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the	MET	22	19.5	1389	14.7
facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 22 19.5 1270 13  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 13  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 13  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14  Resident care equipment is clean and maintained in safe operating condition.	Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 22 19.5 1270 13  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 13  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 13  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 14	Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
Toilet and bath facilities are clean, sanitary, and free of odors.  MET 22 19.5 1270 13  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 13  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 13  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14	and interests of each resident. It is designed to promote opportunities for engaging	MET	8	7.1	1099	11.6
All common resident areas are clean, sanitary and free of odors.  MET		MET	22	19.5	1270	13.4
All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1041 1  MET 1 0.9 1413 14  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14	Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
Resident care equipment is clean and maintained in safe operating condition.  MET 1 0.9 1413 14  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14	All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
MET 6 5.3 1408 14		MET	1	0.9	1413	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
	Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700		MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.  NOT MET 41 36.3 4050 42		NOT MET	41	36.3	4050	42.8

## NURSING HOME PROFILE HONORAGE NURSING CENTER

Street Address:		City and State:	*
RT 2 CASHUA RD		FLORENCE SC 29501	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	05/04/88

SELECTEL	RESIDENT CHARACTERIS	105			
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
85	0		7	'5	
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	85	100	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	81	95.3	90.6	83.2
Toileting	3				
Residents requiring some or total assista	ance in toileting.	81	95.3	82.6	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	81	95.3	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	83	97.6	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	2	2.4	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	55	64.7	45.2	37.7
Completely bedfast residents.		3	3.5	4.2	3.4
Residents confined to chairs.		77	90.6	61.6	50.8
Residents requiring restraints.		71	83.5	43.9	41.3
Confused or disoriented residents.		76	89.4	69.6	58.4
Residents with bed sores.		7	8.2	7.0	7.1
Residents receiving special skin care.		85	100	40.8	31.2
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was delicient in the indicated area at the time of the survey.						
facility must meet. There are over 500 separate requirements. The information presented		Y NUMBER & PERCENT OF NOT MEETING REQUIF				
below does not reflect the severity or the duration of the problems leading to a deficiency. A		STATE		TAIA	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	NOT MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	NOT MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	мет	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

	10110				
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		TATE	NAT	ION
——————————————————————————————————————	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8
					1

## NURSING HOME PROFILE FLORENCE CONVALESCENT CENTER

		22002111 02111211	
Street Address:		City and State:	
ROUTE 6 BOX 165CLARK ROAD		FLORENCE SOUTH CAROLIN	NA 29501
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	NON-PROFIT OTHER	06/10/88

OLLLOILL	RESIDENT CHARACTERIST	103					
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:			
44 0			30				
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	41	93.2	86.1	81.5		
Dressing							
Residents requiring some or total assista	ance in dressing.	43	97.7	90.6	83.2		
Toileting							
Residents requiring some or total assista	ance in toileting.	42	95.5	82.6	73.8		
Transferring							
Residents requiring some or total assistance moving from bed to chair or to tub or toilet.			90.9	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	40	90.9	74.3	68.2		
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	25	56.8	45.2	37.7		
Completely bedfast residents.		0	0.0	4.2	3.4		
Residents confined to chairs.		30	68.2	61.6	50.8		
Residents requiring restraints.		10	22.7	43.9	41.3		
Confused or disoriented residents.		44	100	69.6	58.4		
Residents with bed sores.		0	0.0	7.0	7.1		
Residents receiving special skin care.		18	40.9	40.8	31.2		

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is !roblems leading to a deficiency. A

	FACILITY MET/			ENT OF FA REQUIREM	
	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT	TION
	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

## NURSING HOME PROFILE SUNNY ACRES NH INC

Street Address:		City and State:	
RT 1		FORK SC 29543	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	111	NON-PROFIT PRIVATE	01/04/88

Total Residents on Day of Survey:	D RESIDENT CHARACTERIST  Medicare Residents:		aid Resi	dente:	
Total Residents on Day of Survey.	Wedicare nesidents.	Medic	alu nesi	dems.	
103	2		9	)4	
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate cal			ILITY	STATE	NATION
highly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assis	tance in bathing.	94	91.3	86.1	81.5
Dressing					
Residents requiring some or total assis	tance in dressing.	93	90.3	90.6	83.2
Toileting					
Residents requiring some or total assist	tance in toileting.	74	71.8	82.6	73.8
Transferring					
Residents requiring some or total assistub or toilet.	tance moving from bed to chair or to	65	63.1	81.4	77.2
Continence					
Residents with catheters or partial or to	otal loss of bowel or bladder control.	49	47.6	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	5	4.9	4.2	4.6
Eating					
Residents receiving tube feedings or re	equiring assistance with eating.	47	45.6	45.2	37.7
			·		
Completely bedfast residents.		1	1.0	4.2	3.4
Residents confined to chairs.		47	45.6	61.6	50.8
Residents requiring restraints.		44	42.7	43.9	41.3
Confused or disoriented residents.		76	73.8	69.6	58.4
Residents with bed sores.		4	3.9	7.0	7.1
Residents receiving special skin care.		25	24.3	40.8	31.2

was deficient in the indicated area at the time of the survey.					
facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCI			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		ER & PERC MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	MATE %	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	NOT MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	МЕТ	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE FOUNTAIN INN CONV HOME

	I OOM I AM IN	COMATIONE	
Street Address:		City and State:	
501 GULLIVER ST		FOUNTAIN INN SC 29644	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	44	PROPRIETARY	11/25/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
44	0		4	ł <b>0</b>			
Caution: A large number of residents with these char	acteristics does not indicate whether those	FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate can highly specialized care and services.	re. It may reflect the facility's ability to provide	#	%	%	%		
Bathing	•						
Residents requiring some or total assis	stance in bathing.	38	86.4	74.2	78.3		
Dressing							
Residents requiring some or total assis	stance in dressing.	33	75.0	79.3	76.7		
Toileting							
Residents requiring some or total assis	stance in toileting.	29	65.9	61.9	63.4		
Transferring							
Residents requiring some or total assistub or toilet.	stance moving from bed to chair or to	44	100	63.3	66.0		
Continence							
Residents with catheters or partial or to	otal loss of bowel or bladder control.	14	31.8	54.5	59.1		
Residents on individually written bowel	and bladder retraining program.	0	0.0	3.6	6.1		
Eating							
Residents receiving tube feedings or re	equiring assistance with eating.	11	25.0	17.7	29.3		
Completely bedfast residents.		0	0.0	0.6	3.6		
Residents confined to chairs.		9	20.5	24.8	39.1		
Residents requiring restraints.		14	31.8	18.6	31.7		
Confused or disoriented residents.		21	47.7	58.2	55.8		
Residents with bed sores.		3	6.8	2.7	4.7		
Residents receiving special skin care.		3	6.8	14.3	24.0		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
		STATE		NAT	ION	
deliciency may represent an ongoing problem of a one-time railule of a single stan person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	que	4.0	198	3.6	
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8	

eminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented elow does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

#### NURSING HOME PROFILE BROOKVIEW HOUSE INC

	HOOKALE	HOOSE HAO	
Street Address:		City and State:	
600 THOMPSON ST BOX 1240		GAFFNEY SC 29340	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	132	PROPRIETARY	02/10/88

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
87	0		7	'8	
	ution: A large number of residents with these characteristics does not indicate whether those sidents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide		ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	64	73.6	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	76	87.4	90.6	83.2
Toileting	and an accomign				
Residents requiring some or total assist	ance in telleting	60	69.0	82.6	73.8
Transferring	ance in tolleting.	00	03.0	02.0	75.0
Residents requiring some or total assist	ance moving from bed to chair or to	50	00.0	0.4.4	77.0
tub or toilet.		53	60.9	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	59	67.8	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	22	25.3	45.2	37.7
Completely bedfast residents.		2	2.3	4.2	3.4
Residents confined to chairs.		48	55.2	61.6	50.8
residents commed to chairs.					
Paristanta mandrida mandrida		36	41.4	43.9	41.3
Residents requiring restraints.		30	41.4	40.9	41.5
			50.0		50.4
Confused or disoriented residents.		44	50.6	69.6	58.4
Residents with bed sores.		4	4.6	7.0	7.1
Residents receiving special skin care.		45	51.7	40.8	31.2

FACILITY MET/					
NOT	ST	ATE	NAT	ION	
MET	#	%	#	%	
MET	6	5.3	201	2.1	
MET	13	11.5	518	5.5	
MET	0	0.0	168	1.8	
MET	3	2.7	806	8.5	
NOT MET	34	30.1	1618	17.1	
MET	7	6.2	36	0.4	
MET	0	0.0	205	2.2	
MET	0	0.0	30	0.3	
MET	0	0.0	145	1.5	
MET	2	1.8	49	0.5	
MET	11	9.7	508	5.4	
NOT MET	29	25.7	2816	29.8	
NOT MET	35	31.0	1733	18.3	
NOT MET	22	19.5	1052	11.1	
MET	38	33.6	1512	16.0	
MET	23	20.4	1665	17.6	
	MET/NOT MET  MET  MET  MET  MET  MET  MET  MET	MET/ NOT ST MET 6  MET 6  MET 13  MET 0  MET 3  NOT MET 34  MET 7  MET 0  MET 0  MET 0  MET 2  MET 11  NOT MET 29  NOT MET 29  NOT MET 22  MET 35	MET/NOT MET         NOT MEETING STATE           MET         6         5.3           MET         13         11.5           MET         0         0.0           MET         34         30.1           MET         7         6.2           MET         0         0.0           MET         0         0.0           MET         0         0.0           MET         1.8         3.1           MET         11         9.7           NOT MET         29         25.7           NOT MET         35         31.0           NOT MET         22         19.5           MET         38         33.6	NOT MEET/ING REOUIREM   STATE   NAT   NAT   MET   NAT   MET   NAT   MET   NAT   MET   NAT   MET   NAT   NA	

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY		R & PERCI		
facility must meet. There are over 500 separate requirements. The information presented	MET/			REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE	+	TION
denote noy may represent an origonity problem of a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

# NURSING HOME PROFILE CHEROKEE CO LTC FACILITY

Street Address:	eet Address: City and State:		
1420 N LIMESTONE ST		GAFFNEY SC 29340	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	44	LOCAL GOVERNMENT	04/15/88

	RESIDENT CHARACTERIST					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
44	0		4	4		
Caution: A large number of residents with these chara		FACILITY		STATE	NATION	
residents are receiving appropriate or inappropriate car highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	37	84.1	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	40	90.9	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	40	90.9	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	40	90.9	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	35	79.5	74.3	68.2	
Residents on individually written bowel	and bladder retraining program.	5	11.4	4.2	4.6	
Eating						
Residents receiving tube feedings or re-	quiring assistance with eating.	21	47.7	45.2	37.7	
Completely bedfast residents.		1	2.3	4.2	3.4	
Residents confined to chairs.		32	72.7	61.6	50.8	
Residents requiring restraints.		32	72.7	43.9	41.3	
Confused or disoriented residents.		30	68.2	69.6	58.4	
Residents with bed sores.		3	6.8	7.0	7.1	
Residents receiving special skin care.		14	31.8	40.8	31.2	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACIL NOT MEETING REQUIREMEN			
		ST	ATE	NAT	ION
- a single star person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	МЕТ	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	NOT MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	МЕТ	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

facility must meet. There are over 500 separate requirements. The information presented				RCENT OF FACILITIES	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT		ATE	NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	# '	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE WINYAH EXTENDED CARE CTR INC

	S ISLAND RD GEORGETOWN SC 29440				
Street Address:	-	City and State:			
2715 S ISLAND RD		GEORGETOWN SC 29440			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE/MEDICAID SNF/ICF	84	PROPRIETARY	06/18/87		

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
84	0		6	3	
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reliect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	70	83.3	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	74	88.1	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	72	85.7	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	69	82.1	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	60	71.4	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	36	42.9	45.2	37.7
Completely bedfast residents.		0	0.0	4.2	3.4
Residents confined to chairs.		72	85.7	61.6	50.8
Residents requiring restraints.		45	53.6	43.9	41.3
Confused or disoriented residents.		66	78.6	69.6	58.4
Residents with bed sores.		5	6.0	7.0	7.1
Residents receiving special skin care.		84	100	40.8	31.2
					1

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PER			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	МЕТ	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	МЕТ	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	МЕТ	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	мет	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	МЕТ	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE GRADY H HIPP NURSING CENTER

9111712	City and State:				
Street Address:		City and State:			
661 RUTHERFORD RD		GREENVILLE SC 29609			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE/MEDICAID SNF/ICF	112	LOCAL GOVERNMENT	01/28/88		

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
110	0	62			
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	82	74.5	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	104	94.5	90.6	83.2
Toileting	3				
Residents requiring some or total assista	ance in toileting.	99	90.0	82.6	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	96	87.3	81.4	77.2
Continence					
Residents with catheters or partial or tot	tal loss of bowel or bladder control.	79	71.8	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	8	7.3	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	40	36.4	45.2	37.7
Completely bedfast residents.		0	0.0	4.2	3.4
Residents confined to chairs.		64	58.2	61.6	50.8
Residents requiring restraints.		55	50.0	43.9	41.3
Confused or disoriented residents.		51	46.4	69.6	58.4
Residents with bed sores.		3	2.7	7.0	7.1
Residents receiving special skin care.		110	100	40.8	31.2

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACIL NOT MEETING REOUIREMENT			
low does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NATIO	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#			%
	IVILI	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
		STATE		_	ION	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

04/14/88

# NURSING HOME PROFILE HILLHAVEN HEALTH CARE

Street Address:

411 ANSEL ST

GREENVILLE SC 29601

Participation: # of Beds: Type of Ownership: Survey Date:

### SELECTED RESIDENT CHARACTERISTICS

**PROPRIETARY** 

129

MEDICARE/MEDICAID SNF/ICF

SELECTED	RESIDENT CHARACTERIST	ICS					
Total Residents on Day of Survey: Medicare Residents: Medicaid Residents							
126	o		110				
Caution: A large number of residents with these chara	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	103	81.7	86.1	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	95	75.4	90.6	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	103	81.7	82.6	73.8		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	94	74.6	81.4	77.2		
Continence							
Residents with catheters or partial or total loss of bowel or bladder control.			67.5	74.3	68.2		
Residents on individually written bowel a	and bladder retraining program.	5	4.0	4.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	37	29.4	45.2	37.7		
Completely bedfast residents.		0	0.0	4.2	3.4		
Residents confined to chairs.		60	47.6	61.6	50.8		
*							
Residents requiring restraints.		64	50.8	43.9	41.3		
Confused or disoriented residents.		69	54.8	69.6	58.4		
Residents with bed sores.		12	9.5	7.0	7.1		
Residents receiving special skin care.		32	25.4	40.8	31.2		

was delicient in the indicated area at the time of the survey.						
facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF F				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	TION	
	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	МЕТ	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	мет	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a		Y NUMBER & PERCENT OF FACILITIES NOT MEETING REOUIREMENTS				
facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	. 2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE OAKMONT EAST NURSING CENTER

Street Address:		City and State:	
601 SULPHUR SPRINGS RD		GREENVILLE SC 29611	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	132	PROPRIETARY	09/17/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
120	1	46			
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
highly specialized care and services.	residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	100	83.3	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	119	99.2	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	116	96.7	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	113	94.2	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	89	74.2	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	5	4.2	4.2	4.6
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	65	54.2	45.2	37.7
	•				
Completely bedfast residents.		3	2.5	4.2	3.4
Residents confined to chairs.		112	93.3	61.6	50.8
Residents requiring restraints.		86	71.7	43.9	41.3
<u> </u>					
Confused or disoriented residents.		83	69.2	69.6	58.4
Residents with bed sores.		6	5.0	7.0	7.1
Residents receiving special skin care.		120	100	40.8	31.2

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		Y NUMBER & PERCENT OF FACI NOT MEETING REQUIREMEN			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT			NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Deminden There 00 calcuted and a sixth of the sixth of th	FACILITY	NIL IN ADIC	D & DEDO		CULTIFE	
<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		Y NUMBER & PERCENT OF NOT MEETING REQUIR				
		ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE OAKMONT WEST ICF

	_ OAKWON I	WEST IOI	
Street Address:		City and State:	
600 SULPHUR SPRINGS RD		GREENVILLE SC 29611	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	125	PROPRIETARY	09/16/87

	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
117	0		3	86	
Caution: A large number of residents with these chara-	cteristics does not indicate whether those	FACILITY		STATE	NATION
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	53	45.3	74.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	77	65.8	79.3	76.7
Toileting					
Residents requiring some or total assista	ance in toileting.	58	49.6	61.9	63.4
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	73	62.4	63.3	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	55	47.0	54.5	59.1
Residents on individually written bowel a	and bladder retraining program.	16	13.7	3.6	6.1
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	7	6.0	17.7	29.3
Completely bedfast residents.		0	0.0	0.6	3.6
Residents confined to chairs.		14	12.0	24.8	39.1
Residents requiring restraints.		31	26.5	18.6	31.7
Confused or disoriented residents.		52	44.4	58.2	55.8
Residents with bed sores.		3	2.6	2.7	4.7
Residents receiving special skin care.		19	16.2	14.3	24.0

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	_		NAT	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	NOT MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

	NUMBER & PERCENT OF FAC			FACILITY MET/	Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	
ION	NAT	ATE	STATE		below does not reflect the severity or the duration of the problems leading to a deficiency. A	
%	#	%	#	NOT MET	deficiency may represent an ongoing problem or a one-time failure of a single staff person.	
4.7	255	12.0	3	MET	Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	
13.7	748	4.0	1	MET	Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	
11.0	601	0.0	0	MET	Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	
25.3	1385	24.0	6	MET	Drugs are administered according to the written orders of the attending physician.	
19.1	1045	32.0	8	NOT MET	Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	
4.9	269	0.0	0	MET	Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	
5.7	311	16.0	4	NOT MET	Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	
8.8	481	12.0	3	MET	An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	
8.8	479	28.0	7	NOT MET	Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	
19.4	1064	24.0	6	MET	Toilet and bath facilities are clean, sanitary, and free of odors.	
21.4	1169	20.0	5	NOT MET	All common resident areas are clean, sanitary and free of odors.	
0.0	0	0.0	0	MET	All essential mechanical and electrical equipment is maintained in safe operating condition.	
0.0	0	0.0	0	MET	Resident care equipment is clean and maintained in safe operating condition.	
0.0	0	0.0	0	MET	Isolation techniques to prevent the spread of infection are followed by all personnel.	
4.9	267	4.0	1	MET	The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	
44.8	2452	24.0	6	NOT MET	Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	
	311 481 479 1064 1169 0 0	16.0 12.0 28.0 24.0 20.0 0.0 0.0	4 3 7 6 5 0 0	NOT MET  MET  NOT MET  MET  MET  MET  MET	with accepted professional practices by qualified therapists or qualified assistants.  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  Toilet and bath facilities are clean, sanitary, and free of odors.  All common resident areas are clean, sanitary and free of odors.  All essential mechanical and electrical equipment is maintained in safe operating condition.  Resident care equipment is clean and maintained in safe operating condition.  Isolation techniques to prevent the spread of infection are followed by all personnel.  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  Food is stored, refrigerated, prepared, distributed, and served under sanitary	

# NURSING HOME PROFILE PIEDMONT NURSING CENTER INC

Street Address:		City and State:	***
809 LAURENS RD		GREENVILLE SC 29607	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	79	PROPRIETARY	06/18/87

SELECIEL	RESIDENT CHARACTERIST	105			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
77	0	60			
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	59	76.6	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	63	81.8	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	49	63.6	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	51	66.2	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	41	53.2	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	3	3.9	4.2	4.6
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	15	19.5	45.2	37.7
Completely bedfast residents.		0	0.0	4.2	3.4
Residents confined to chairs.		25	32.5	61.6	50.8
Residents requiring restraints.		37	48.1	43.9	41.3
Confused or disoriented residents.		37	48.1	69.6	58.4
				7.0	7.4
Residents with bed sores.		4	5.2	7.0	7.1
		00	40.4	40.0	31.2
Residents receiving special skin care.		38	49.4	40.8	31.2

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	OT STATE		NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	МЕТ	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				R & PERCENT OF FACIL MEETING REQUIREMEN	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.		22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	МЕТ	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE ROLLING GREEN VILLAGE HEALTH CARE FAC

Street Address: City and State:			
1 HOKE SMITH BLVD		GREENVILLE SC 29615	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE SNF/ICF	44	NON-PROFIT PRIVATE	08/18/87

RESIDENT CHARACTERIST	100				
Medicare Residents:	Medicaid Residents:				
0	0				
	FACILITY		STATE	NATION	
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		%	%	%	
ance in bathing.	16	80.0	86.1	81.5	
ance in dressing.	17	85.0	90.6	83.2	
<u> </u>					
ance in toileting.	13	65.0	82.6	73.8	
ance moving from bed to chair or to	12	60.0	81.4	77.2	
Residents with catheters or partial or total loss of bowel or bladder control.		55.0	74.3	68.2	
Residents on individually written bowel and bladder retraining program.		0.0	4.2	4.6	
Residents receiving tube feedings or requiring assistance with eating.		35.0	45.2	37.7	
	0	0.0	4.2	3.4	
	6	30.0	61.6	50.8	
	10	50.0	43.9	41.3	
	11	55.0	69.6	58.4	
	1	5.0	7.0	7.1	
	4	20.0	40.8	31.2	
	Medicare Residents:  0 cheristics does not indicate whether those e. It may reflect the facility's ability to provide ance in bathing.  ance in dressing.  ance in toileting.  ance moving from bed to chair or to tal loss of bowel or bladder control.  and bladder retraining program.	Medicare Residents:  0 cteristics does not indicate whether those ance in bathing.  16 ance in dressing.  17 ance in toileting.  18 ance moving from bed to chair or to  19 tal loss of bowel or bladder control.  11 and bladder retraining program.  0 quiring assistance with eating.  7  10  11	Medicare Residents:  0 Coteristics does not indicate whether those at It may reflect the facility's ability to provide  ance in bathing.  16 80.0  ance in dressing.  17 85.0  ance moving from bed to chair or to  12 60.0  tal loss of bowel or bladder control.  11 55.0  and bladder retraining program.  0 0.0  quiring assistance with eating.  7 35.0  10 50.0  11 55.0	Medicare Residents:         Medicaid Residents:           0         0           cteristics does not indicate whether those at it may reflect the facility's ability to provide         FACILITY         STATE           #         %           ance in bathing.         16         80.0         86.1           ance in dressing.         17         85.0         90.6           ance in toileting.         13         65.0         82.6           ance moving from bed to chair or to         12         60.0         81.4           tal loss of bowel or bladder control.         11         55.0         74.3           and bladder retraining program.         0         0.0         4.2           quiring assistance with eating.         7         35.0         45.2           6         30.0         61.6           10         50.0         43.9           11         55.0         69.6           1         5.0         7.0	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
		ST	ATE	NAT	ION	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ERCENT OF FACILITIE	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE		+	TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.0
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.0
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

# NURSING HOME PROFILE WESTSIDE HEALTH CARE INC.

WESTSIDE HEAETH SAILE INS							
Street Address:		City and State:					
8 N TEXAS AVE		GREENVILLE SC 29611					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	11/13/87				

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
87	0	63					
Caution: A large number of residents with these characteristics		FACILITY		STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assista	ance in bathing.	66	75.9	86.1	81.5		
Dressing							
Residents requiring some or total assista	ance in dressing.	85	97.7	90.6	83.2		
Toileting							
Residents requiring some or total assista	ance in toileting.	78	89.7	82.6	73.8		
Transferring							
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	60	69.0	81.4	77.2		
Continence							
Residents with catheters or partial or to	67	77.0	74.3	68.2			
Residents on individually written bowel a	and bladder retraining program.	2	2.3	4.2	4.6		
Eating							
Residents receiving tube feedings or red	quiring assistance with eating.	26	29.9	45.2	37.7		
Completely bedfast residents.		0	0.0	4.2	3.4		
Residents confined to chairs.		46	52.9	61.6	50.8		
Residents requiring restraints.		10	11.5	43.9	41.3		
Confused or disoriented residents.		52	59.8	69.6	58.4		
Residents with bed sores.		3	3.4	7.0	7.1		
Residents receiving special skin care.		0	0.0	40.8	31.2		

was deficient in the indicated area at the time of the survey.					
<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITY NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A				NA-	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	#	1 %	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6
				1.	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE GREENWOOD NH INC

GITEETT OF THE INTO							
Street Address:		City and State:					
437 E CAMBRIDGE ST BOX 3109		GREENWOOD SC 29646					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	108	PROPRIETARY	07/23/87				

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
100	0	58				
Caution: A large number of residents with these characteristics does not indicate whether those residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		FACILITY		STATE	NATION	
		#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	93	93.0	86.1	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	92	92.0	90.6	83.2	
Toileting						
Residents requiring some or total assista	ance in toileting.	83	83.0	82.6	73.8	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	84	84.0	81.4	77.2	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.		73	73.0	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	uiring assistance with eating.	55	55.0	45.2	37.7	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		73	73.0	61.6	50.8	
Residents requiring restraints.		51	51.0	43.9	41.3	
Confused or disoriented residents.		77	77.0	69.6	58.4	
Residents with bed sores.		4	4.0	7.0	7.1	
Residents receiving special skin care.		8	8.0	40.8	31.2	

FACILITY MET/ NOT	1			CILITIES
ИОТ	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
NOT	STATE		NA <sup>-</sup>	LION
MET	#	%	#	%
MET	6	5.3	201	2.1
MET	13	11.5	518	5.5
MET	0	0.0	168	1.8
MET	3	2.7	806	8.5
NOT MET	34	30.1	1618	17.1
MET	7	6.2	36	0.4
MET	0	0.0	205	2.2
MET	0	0.0	30	0.3
MET	0	0.0	145	1.5
MET	2	1.8	49	0.5
MET	11	9.7	508	5.4
MET	29	25.7	2816	29.8
MET	35	31.0	1733	18.3
NOT MET	22	19.5	1052	11.1
NOT MET	38	33.6	1512	16.0
MET	23	20.4	1665	17.6
	MET  MET  NOT MET  MET  MET  MET  MET  MET  MET  MET	MET     13       MET     0       MET     34       MET     7       MET     0       MET     0       MET     0       MET     11       MET     29       MET     35       NOT MET     22       NOT MET     38	MET       13       11.5         MET       0       0.0         MET       3       2.7         NOT MET       34       30.1         MET       0       0.0         MET       0       0.0         MET       0       0.0         MET       2       1.8         MET       11       9.7         MET       29       25.7         MET       35       31.0         NOT MET       22       19.5         NOT MET       38       33.6	MET       13       11.5       518         MET       0       0.0       168         MET       3       2.7       806         NOT MET       34       30.1       1618         MET       0       0.0       205         MET       0       0.0       30         MET       0       0.0       145         MET       2       1.8       49         MET       11       9.7       508         MET       29       25.7       2816         MET       35       31.0       1733         NOT MET       22       19.5       1052         NOT MET       38       33.6       1512

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				NT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT		ATE		TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%   %	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

## NURSING HOME PROFILE NURSING CTR OF GREENWOOD METHODIST

Street Address:	Street Address: City and State:		
1110 MARSHALL RD BOX 1203		GREENWOOD SC 29646	
Participation: # of Beds: Type of Ownership:		Survey Date:	
MEDICARE/MEDICAID SNF/ICF	102	NON-PROFIT RELIGIOUS	08/20/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
102	0	33				
Caution: A large number of residents with these characteristics.	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	42	41.2	86.1	81.5	
Dressing	3					
Residents requiring some or total assista	ance in dressing	76	74.5	90.6	83.2	
Toileting	ande in dressing.	1 70	74.0	00.0	00.2	
•		00	01.4	00.0	73.8	
Residents requiring some or total assista	ance in tolleting.	83	81.4	82.6	/3.6	
Transferring  Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	73	71.6	81.4	77.2	
Continence						
Residents with catheters or partial or tot	tal loss of bowel or bladder control.	73	71.6	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	2	2.0	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	38	37.3	45.2	37.7	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		66	64.7	61.6	50.8	
Residents requiring restraints.		28	27.5	43.9	41.3	
Confused or disoriented residents.		64	62.7	69.6	58.4	
Residents with bed sores.		8	7.8	7.0	7.1	
Residents receiving special skin care.		38	37.3	40.8	31.2	

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FACILITIES REQUIREMENTS	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE	+	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	FACILITY MET/ NOT MET	NOT			CILITIES
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		Y NUMBER & PERCENT OF FACILITY NOT MEETING REQUIREMENT		
	MFT [	STATE		NATION	
		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE GREER HEALTHCARE CENTER

 Street Address:

 PO BOX 1148
 GREER SC 29651

 Participation:
 # of Beds:
 Type of Ownership:
 Survey Date:

 MEDICARE/MEDICAID SNF/ICF
 132
 PROPRIETARY
 03/26/87

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
132	1		9	2	
Caution: A large number of residents with these characresidents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	120	90.9	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	120	90.9	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	108	81.8	82.6	73.8
Transferring					
Residents requiring some or total assistated tub or toilet.	ance moving from bed to chair or to	103	78.0	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	85	64.4	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	49	37.1	45.2	37.7
Completely bedfast residents.		0	0.0	4.2	3.4
Residents confined to chairs.		86	65.2	61.6	50.8
Residents requiring restraints.		84	63.6	43.9	41.3
Confused or disoriented residents.		90	68.2	69.6	58.4
Residents with bed sores.		12	9.1	7.0	7.1
Residents receiving special skin care.		10	7.6	40.8	31.2
	<del></del>				

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		Y NUMBER & PERCENT OF F NOT MEETING REQUIRE				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				CENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	ST	ATE	TAN	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	мет	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	мет	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE ROGER HUNTINGTON NURSING CENTER

	Sena I III de la Cal	I HOLIGHTON GENTLEIL	
Street Address:		City and State:	
PO BOX 1149		GREER SC 29652	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	NON-PROFIT OTHER	04/20/88

	RESIDENT CHARACTERIST				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
87	2	58			
Caution: A large number of residents with these charac residents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION
highly specialized care and services.	. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	77	88.5	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	85	97.7	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	74	85.1	82.6	73.8
Transferring					
Residents requiring some or total assistance moving from bed to chair or to tub or toilet.		81	93.1	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	74	85.1	74.3	68.2
	-				
Residents on individually written bowel a	and bladder retraining program.	2	2.3	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	25	28.7	45.2	37.7
Completely bedfast residents.		10	11.5	4.2	3.4
Residents confined to chairs.		56	64.4	61.6	50.8
Residents requiring restraints.		56	64.4	43.9	41.3
Confused or disoriented residents.		68	78.2	69.6	58.4
Residents with bed sores.		7	8.0	7.0	7.1
Residents receiving special skin care.		50	57.5	40.8	31.2

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FA	
		ST	ATE	NAT	ION
deficiency may represent an origonity problem of a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERC		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	МЕТ	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	мет	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE MORRELL MEMORIAL CONV CTR

Street Address:		City and State:				
PO BOX 1318		HARTSVILLE SC 29550				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICARE/MEDICAID SNF/ICF	132	NON-PROFIT PRIVATE	03/17/88			

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
126	0	110		10	
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	110	87.3	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	122	96.8	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	95	75.4	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	113	89.7	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	85	67.5	74.3	68.2
·					
Residents on individually written bowel	and bladder retraining program.	2	1.6	4.2	4.6
Eating	and clauser remaining programm				
Residents receiving tube feedings or rec	quiring assistance with eating	57	45.2	45.2	37.7
	quining accitation with oamig.				
Completely bedfast residents.		16	12.7	4.2	3.4
Residents confined to chairs.		69	54.8	61.6	50.8
_					
Residents requiring restraints.		53	42.1	43.9	41.3
Confused or disoriented residents.		81	64.3	69.6	58.4
Residents with bed sores.		9	7.1	7.0	7.1
Residents receiving special skin care.		38	30.2	40.8	31.2
Tresidents receiving special skill care.					

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ICENT OF FACILITIES G REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NA <sup>-</sup>	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE THAD E SALEEBY DEVELOPMENTAL CTR

Street Address:		City and State:	
714 LEWELLEN DR		HARTSVILLE SC 29550	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	STATE GOVERNMENT	04/27/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
88	0	88		8	
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	88	100	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	88	100	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	88	100	82.6	73.8
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	87	98.9	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	88	100	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	14	15.9	4.2	4.6
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	84	95.5	45.2	37.7
					( ·
Completely bedfast residents.		4	4.5	4.2	3.4
Residents confined to chairs.		69	78.4	61.6	50.8
Residents requiring restraints.		0	0.0	43.9	41.3
Confused or disoriented residents.		88	100	69.6	58.4
Residents with bed sores.		0	0.0	7.0	7.1
			400	40.0	04.0
Residents receiving special skin care.		88	100	40.8	31.2

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	NOT MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCI		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE		NAT	TION
renciency may represent an ongoing problem of a one-time failure of a single staff person.		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	мет	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE THE HILTON HEAD CENTER OF SC

Street Address:		City and State:				
BILL FRIES DRIVE HILTON HEAD ISLAND SC 29938						
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICARE/MEDICAID SNF/ICF	44	PROPRIETARY	07/31/87			

JELEO I EL	RESIDENT CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
43	43		32			
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION	
highly specialized care and services.	e. It may renect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	38	88.4	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	38	88.4	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	34	79.1	82.6	73.8	
Transferring	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	29	67.4	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	32	74.4	74.3	68.2	
Residents on individually written bowel	and bladder retraining program.	3	7.0	4.2	4.6	
Eating	and state of the s					
Residents receiving tube feedings or rec	quiring assistance with eating	6	14.0	45.2	37.7	
The state of the s	quining decisionaries man earnig.					
Completely bedfast residents.		0	0.0	4.2	3.4	
- The state of the			-			
Residents confined to chairs.		13	30.2	61.6	50.8	
residents commed to chans.						
Pacidents requiring restraints		13	30.2	43.9	41.3	
Residents requiring restraints.		10	00.2	10.0		
Confused or discriminated residents		35	81.4	69.6	58.4	
Confused or disoriented residents.		33	01.4	00.0	55.4	
Basidana with had		0	0.0	7.0	7.1	
Residents with bed sores.		0	0.0	7.0	7.1	
		5	11.6	40.8	31.2	
Residents receiving special skin care.		5	11.6	40.0	31.2	

was denoted in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACIL NOT MEETING REQUIREMEN			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	ATE NAT	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REOUIREMENTS				
pelow does not reflect the severity or the duration of the problems leading to a deficiency. A		STATE		NA.	LION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	. 8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	мет	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	мет	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	мет	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	
					L	

## NURSING HOME PROFILE THE SEABROOK OF HILTON HEAD

Street Address:		City and State:			
300 WOOD HAVEN DR		HILTON HEAD ISLAND SC 29	938		
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE SNF	44	NON-PROFIT OTHER	08/05/87		

SELECTE	RESIDENT CHARACTERIST	103							
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:							
38	38 2			0					
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION				
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%				
Bathing									
Residents requiring some or total assist	ance in bathing.	36	94.7	86.1	81.5				
Dressing									
Residents requiring some or total assist	ance in dressing.	34	89.5	90.6	83.2				
Toileting									
Residents requiring some or total assist	ance in toileting.	23	60.5	82.6	73.8				
Transferring									
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	19	50.0	81.4	77.2				
Continence									
Residents with catheters or partial or total loss of bowel or bladder control.			78.9	74.3	68.2				
Residents on individually written bowel	and bladder retraining program.	2	5.3	4.2	4.6				
Eating									
Residents receiving tube feedings or re-	quiring assistance with eating.	9	23.7	45.2	37.7				
Completely bedfast residents.		0	0.0	4.2	3.4				
Residents confined to chairs.		18	47.4	61.6	50.8				
Residents requiring restraints.		12	31.6	43.9	41.3				
Confused or disoriented residents.		19	50.0	69.6	58.4				
Residents with bed sores.		2	5.3	7.0	7.1				
Residents receiving special skin care.		0	0.0	40.8	31.2				

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACION NOT MEETING REQUIREMEN			
elow does not reflect the severity or the duration of the problems leading to a deficiency. A eficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET/		ATE	1	TION
	MET	#	% %	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	МЕТ	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	МЕТ	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	мет	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	мет	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	МЕТ	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		NUMBER & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A		STATE		NATION	
ciency may represent an ongoing problem or a one-time failure of a single staff person.  MET	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	1.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

#### NURSING HOME PROFILE C W JOHNSON ICE INC

C W JOHNSON ICF INC							
Street Address:		City and State:					
51 N MAIN ST		INMAN SC 29349					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICAID ICF	44	PROPRIETARY	08/28/87				

02220122	RESIDENT CHARACTERIST							
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:						
42			30					
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assista	ance in bathing.	42	100	74.2	78.3			
Dressing								
Residents requiring some or total assista	ance in dressing.	28	66.7	79.3	76.7			
Toileting								
Residents requiring some or total assista	ance in toileting.	21	50.0	61.9	63.4			
Transferring								
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	22	52.4	63.3	66.0			
Continence								
Residents with catheters or partial or tot	tal loss of bowel or bladder control.	19	45.2	54.5	59.1			
Residents on individually written bowel a	and bladder retraining program.	0	0.0	3.6	6.1			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	7	16.7	17.7	29.3			
Completely bedfast residents.		0	0.0	0.6	3.6			
Residents confined to chairs.		8	19.0	24.8	39.1			
					!			
Residents requiring restraints.		13	31.0	18.6	31.7			
Confused or disoriented residents.		23	54.8	58.2	55.8			
Residents with bed sores.		2	4.8	2.7	4.7			
		1	2.4	14.3	24.0			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACIL NOT MEETING REQUIREMEN			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY			ENT OF FA		
facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NOT MEETING RE		REQUIREM	EQUIREMENTS	
		STATE		NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	6	24.0	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	6	24.0	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8	
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### NURSING HOME PROFILE CAMP CARE INC

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Street Address:		City and State:	,
RT 4 BOX 3		INMAN SC 29349	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	88	PROPRIETARY	08/07/87

	RESIDENT CHARACTERIST				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
86	0		5	55	
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car		FAC	ILITY	STATE	NATION
highly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	53	61.6	74.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	49	57.0	79.3	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	36	41.9	61.9	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	34	39.5	63.3	66.0
Continence					-
Residents with catheters or partial or to	tal loss of bowel or bladder control.	32	37.2	54.5	59.1
Residents on individually written bowel	and bladder retraining program.	2	2.3	3.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	12	14.0	17.7	29.3
Completely bedfast residents.		1	1.2	0.6	3.6
Residents confined to chairs.		27	31.4	24.8	39.1
			ļ		
Residents requiring restraints.		22	25.6	18.6	31.7
Confused or disoriented residents.		40	46.5	58.2	55.8
Residents with bed sores.		4	4.7	2.7	4.7
		40	44.0	140	04.0
Residents receiving special skin care.		12	14.0	14.3	24.0

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the p					
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Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
elow does not reflect the severity or the duration of the problems leading to a deficiency. A eficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET MET	3	12.0	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		0	0.0	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.		6	24.0	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8	

#### NURSING HOME PROFILE CAMPHAVEN NH

	CHIAILLIM	A TIA IAII	
Street Address:		City and State:	
RT 4 BOX 1AA 63 BLACKSTOCK RD		INMAN SC 29349	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	176	PROPRIETARY	05/13/88

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:								
		,						
174  Caution: A large number of residents with these characters.	2			34	1			
residents are receiving appropriate or inappropriate care		#	SILITY %	STATE %	NATION %			
highly specialized care and services.  Bathing		#	70	70	70			
batting								
Residents requiring some or total assista	ance in bathing.	159	91.4	86.1	81.5			
Dressing								
Residents requiring some or total assista	ance in dressing.	161	92.5	90.6	83.2			
Toileting								
Residents requiring some or total assista	ance in toileting.	147	84.5	82.6	73.8			
Transferring								
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	156	89.7	81.4	77.2			
Continence								
Residents with catheters or partial or tot	al loss of bowel or bladder control.	139	79.9	74.3	68.2			
Residents on individually written bowel a	and bladder retraining program.	9	5.2	4.2	4.6			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	67	38.5	45.2	37.7			
Completely bedfast residents.		18	10.3	4.2	3.4			
Residents confined to chairs.		138	79.3	61.6	50.8			
Residents requiring restraints.		62	35.6	43.9	41.3			
Confused or disoriented residents.		141	81.0	69.6	58.4			
Residents with bed sores.		14	8.0	7.0	7.1			
Residents receiving special skin care.		59	33.9	40.8	31.2			

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	/ NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT					
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	ATE   %	NAT #	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	NAT	TION
		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

## NURSING HOME PROFILE

INMAN NH							
Street Address:		City and State:					
51 N MAIN ST		INMAN SC 29349					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	40	PROPRIETARY	08/05/87				

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
40	0		38				
Caution: A large number of residents with these charac	teristics does not indicate whether those	FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assista	ance in bathing.	40	100	86.1	81.5		
Dressing							
Residents requiring some or total assista	ance in dressing	39	97.5	90.6	83.2		
Toileting	and an discounty.		07.0	00.0	00.2		
Residents requiring some or total assista	unce in taileting	39	97.5	82.6	73.8		
Transferring	trice in tolleting.		07.0	02.0	70.0		
Residents requiring some or total assista tub or toilet.	ance moving from bed to chair or to	39	97.5	81.4	77.2		
Continence							
Residents with catheters or partial or total loss of bowel or bladder control.			95.0	74.3	68.2		
Residents on individually written bowel a	nd bladder retraining program.	0	0.0	4.2	4.6		
Eating							
Residents receiving tube feedings or req	uiring assistance with eating.	20	50.0	45.2	37.7		
			40.0	4.0	0.4		
Completely bedfast residents.		4	10.0	4.2	3.4		
			70.0		50.0		
Residents confined to chairs.		28	70.0	61.6	50.8		
		00	55.0	40.0	41.0		
Residents requiring restraints.		22	55.0	43.9	41.3		
		00	00.0	60.6	E0.4		
Confused or disoriented residents.		36	90.0	69.6	58.4		
Residents with bed sores.		2	5.0	7.0	7.1		
Residents receiving special skin care.		11	27.5	40.8	31.2		

was deficient in the indicated area at the time of the survey.		-				
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILI NOT MEETING REQUIREMENT				
elow does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	OT STATE		NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			RCENT OF FACILITIES IG REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NATION	
		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

## NURSING HOME PROFILE GOLDEN ACRES ICF

·	GOLDEN ACTIES TO							
Street Address:		City and State:	-					
PO BOX 505		IVA SC 29655						
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICAID ICF	26	PROPRIETARY	08/21/87					

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
23	0	21				
Caution: A large number of residents with these characteristics are residents are residents.		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	22	95.7	74.2	78.3	
Dressing						
Residents requiring some or total assista	ance in dressing.	23	100	79.3	76.7	
Toileting	3					
Residents requiring some or total assista	ance in toileting.	20	87.0	61.9	63.4	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	16	69.6	63.3	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	6	26.1	54.5	59.1	
Residents on individually written bowel a	and bladder retraining program.	5	21.7	3.6	6.1	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	7	30.4	17.7	29.3	
Completely bedfast residents.		0	0.0	0.6	3.6	
Residents confined to chairs.		2	8.7	24.8	39.1	
Residents requiring restraints.		8	34.8	18.6	31.7	
Confused or disoriented residents.		21	91.3	58.2	55.8	
Residents with bed sores.		0	0.0	2.7	4.7	
Residents receiving special skin care.		1	4.3	14.3	24.0	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	TION
deficiency may represent an originity problem of a offe-time failure of a single stail person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	МЕТ	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	МЕТ	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	МЕТ	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	МЕТ	2	8.0	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
facility must meet. There are over 500 separate requirements. The information presented	MET/	NOT MEETING				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	# #	STATE %		FION %	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	3	12.0	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	6	24.0	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	8	32.0	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	7	28.0	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8	

### NURSING HOME PROFILE HERMINA TRAEYE MEMORIAL NH

	*****************		
Street Address:		City and State:	
MAYBANK HIGHWAY		JOHNS ISLAND SC 29455	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	NON-PROFIT PRIVATE	12/09/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
87	0		- 8	1	, '	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	75	86.2	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	79	90.8	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	75	86.2	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	87	100	81.4	77.2	
Continence					-	
Residents with catheters or partial or total loss of bowel or bladder control.		61	70.1	74.3	68.2	
Residents on individually written bowel	and bladder retraining program.	5	5.7	4.2	4.6	
Eating						
Residents receiving tube feedings or re-	quiring assistance with eating.	47	54.0	45.2	37.7	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		68	78.2	61.6	50.8	
Residents requiring restraints.		18	20.7	43.9	41.3	
3						
Confused or disoriented residents.		68	78.2	69.6	58.4	
Residents with bed sores.		6	6.9	7.0	7.1	
Residents receiving special skin care.		45	51.7	40.8	31.2	
Tiestachies receiving special skill care.						

was denoted in the walcated area at the time of the survey.						
<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				NT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	
			<u> </u>	L	l	

	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	S1	ГАТЕ	NA.	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

## NURSING HOME PROFILE KINGSTREE NURSING FACILITY

 Street Address:
 City and State:

 110 MILL ST
 KINGSTREE SC 29556

 Participation:
 # of Beds: Type of Ownership: Survey Date:

 MEDICARE/MEDICAID SNF/ICF
 70
 PROPRIETARY
 10/09/87

SELECTEL	RESIDENT CHARACTERIST	105				
Total Residents on Day of Survey:	Medicare Residents:	Medic	Medicaid Residents:			
70	0	56				
Caution: A large number of residents with these chara	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	60	85.7	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	61	87.1	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	55	78.6	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	53	75.7	81.4	77.2	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.		37	52.9	74.3	68.2	
Residents on individually written bowel	and bladder retraining program.	0	0.0	4.2	4.6	
Eating						
Residents receiving tube feedings or re-	quiring assistance with eating.	31	44.3	45.2	37.7	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		53	75.7	61.6	50.8	
-						
Residents requiring restraints.		23	32.9	43.9	41.3	
Confused or disoriented residents.		44	62.9	69.6	58.4	
Residents with bed sores.		5	7.1	7.0	7.1	
			_			
Residents receiving special skin care.		1	1.4	40.8	31.2	
		I				

minder: These 32 selected performance indicators do not represent all the requirements a lity must meet. There are over 500 separate requirements. The information presented by does not reflect the severity or the duration of the problems leading to a deficiency.		NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	NOT MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
	NOT	S	ГАТЕ	NA <sup>-</sup>	LION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	МЕТ	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	МЕТ	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	мет	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

## NURSING HOME PROFILE COASTAL CENTER D3

	COASTAL		
Street Address:		City and State:	
JAMISON RD		LADSON SC 29456	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	53	STATE GOVERNMENT	06/11/87

OLILO122	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
53	0	53			
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	53	100	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	53	100	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	53	100	82.6	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	53	100	81.4	77.2
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.			100	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	52	98.1	45.2	37.7
Completely bedfast residents.		2	3.8	4.2	3.4
Residents confined to chairs.		51	96.2	61.6	50.8
Residents requiring restraints.		53	100	43.9	41.3
Confused or disoriented residents.		53	100	69.6	58.4
Residents with bed sores.		1	1.9	7.0	7.1
Residents receiving special skin care.		5	9.4	40.8	31.2

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	1			NΙΔ	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	ATE %	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	МЕТ	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				T OF FACILITIES QUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NATION		
	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE COASTAL CENTER MEDICAL C

Street Address:		City and State:	
JAMISON RD		LADSON SC 29456	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNE/ICE	22	STATE GOVERNMENT	10/09/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
20	0	20			
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	20	100	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	20	100	90.6	83.2
Toileting	<u> </u>				
Residents requiring some or total assist	ance in toileting.	20	100	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	20	100	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of howel or bladder control	20	100	74.3	68.2
Tresidents with catheters of partial of to	tal loss of bowel of bladder control.	20	100	7 1.0	
		0	0.0	4.2	4.6
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.0
			100	45.0	07.7
Residents receiving tube feedings or rec	quiring assistance with eating.	20	100	45.2	37.7
Completely bedfast residents.		2	10.0	4.2	3.4
Residents confined to chairs.		18	90.0	61.6	50.8
<u>.</u>					
Residents requiring restraints.		0	0.0	43.9	41.3
Confused or disoriented residents.		20	100	69.6	58.4
Residents with bed sores.		0	0.0	7.0	7.1
Residents receiving special skin care.		0	0.0	40.8	31.2
Treatments receiving special skill care.				L	

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	МЕТ	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.		2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	МЕТ	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	МЕТ	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				CENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE		+	TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.		14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.		1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

### NURSING HOME PROFILE LANCASTER CO CARE CENTER

	EANOASTEN OO OANE CENTEN							
Street Address:		City and State:						
RT 10 BOX 379		LANCASTER SC 29720						
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICARE/MEDICAID SNF/ICF	110	LOCAL GOVERNMENT	05/12/88					

Medicaid Residents:			
83			
FAC	ILITY	STATE	NATION
#	%	%	%
71	68.9	86.1	81.5
81	78.6	90.6	83.2
78	75.7	82.6	73.8
86	83.5	81.4	77.2
67	65.0	74.3	68.2
3	2.9	4.2	4.6
50	48.5	45.2	37.7
4	3.9	4.2	3.4
74	71.8	61.6	50.8
16	15.5	43.9	41.3
55	53.4	69.6	58.4
3	2.9	7.0	7.1
41	39.8	40.8	31.2
	FAC #  71  81  78  86  67  3  50  4  74  16  55	FACILITY # %  71 68.9  81 78.6  78 75.7  86 83.5  67 65.0  3 2.9  50 48.5  4 3.9  74 71.8  16 15.5  55 53.4	83         FACILITY       STATE         #       %       %         71       68.9       86.1         81       78.6       90.6         78       75.7       82.6         86       83.5       81.4         67       65.0       74.3         3       2.9       4.2         4       3.9       4.2         74       71.8       61.6         16       15.5       43.9         55       53.4       69.6         3       2.9       7.0

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REOUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	NAT	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.		14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.		3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	NOT MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

# NURSING HOME PROFILE MARION SIMS NURSING CENTER

III/ III OIN O I TOTTO III G O E I T E I I								
Street Address:		City and State:						
800 WEST MEETING ST		LANCASTER SC 29720						
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICARE/MEDICAID SNF/ICF	111	NON-PROFIT OTHER	05/22/87					

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
110	3	79				
Caution: A large number of residents with these cha		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate chighly specialized care and services.	are. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assis	stance in bathing.	99	90.0	86.1	81.5	
Dressing						
Residents requiring some or total assis	stance in dressing.	107	97.3	90.6	83.2	
Toileting						
Residents requiring some or total assis	stance in toileting.	105	95.5	82.6	73.8	
Transferring						
Residents requiring some or total assistub or toilet.	stance moving from bed to chair or to	100	90.9	81.4	77.2	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.		103	93.6	74.3	68.2	
Residents on individually written bowe	I and bladder retraining program.	5	4.5	4.2	4.6	
Eating						
Residents receiving tube feedings or re	equiring assistance with eating.	63	57.3	45.2	37.7	
Completely bedfast residents.		33	30.0	4.2	3.4	
Residents confined to chairs.		57	51.8	61.6	50.8	
Residents requiring restraints.		43	39.1	43.9	41.3	
·						
Confused or disoriented residents.		97	88.2	69.6	58.4	
Residents with bed sores.		5	4.5	7.0	7.1	
	AL 5					

was denoted in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.				ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6
			1	L	

facility must meet. There are over 500 separate requirements. The information presented		CILITY NUMBER & PER			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	МЕТ	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	МЕТ	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	МЕТ	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	МЕТ	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

### NURSING HOME PROFILE LAURENS NURSING CENTER

	SILEITS ITSI	OIIIO OEIIIEII	
Street Address:		City and State:	
301 PINEHAVEN ST		LAURENS SC 29360	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNE/ICE	132	PROPRIFTARY	11/19/87

	RESIDENT CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
128	0	0 9				
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	114	89.1	86.1	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing	117	91.4	90.6	83.2	
Toileting	ande in dressing.	1	01.4	00.0	00.2	
		110	00.0	00.0	70.0	
Residents requiring some or total assists	ance in toileting.	113	88.3	82.6	73.8	
Transferring  Residents requiring some or total assists	ance moving from hed to chair or to					
tub or toilet.	and moving nom bod to chair or to	121	94.5	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	98	76.6	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	4	3.1	4.2	4.6	
Eating	<u> </u>					
Residents receiving tube feedings or rec	guiring assistance with eating.	89	69.5	45.2	37.7	
	,					
Completely bedfast residents.		6	4.7	4.2	3.4	
completely bearast residents.						
		92	71.9	61.6	50.8	
Residents confined to chairs.		92	71.9	01.0	30.6	
				10.0		
Residents requiring restraints.		70	54.7	43.9	41.3	
Confused or disoriented residents.		89	69.5	69.6	58.4	
Residents with bed sores.		2	1.6	7.0	7.1	
Residents receiving special skin care.		24	18.8	40.8	31.2	
nesidents receiving special skill care.		1				

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FA REOUIREM	
			ATE	NAT	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	NUMBE	R & PERC	ENT OF FA	CILITIES
facility must meet. There are over 500 separate requirements. The information presented			MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT			NA.	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	мет	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8
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Reminder: The results of the full survey are available from the State survey agency or the State ombudsman.

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# NURSING HOME PROFILE RIKARD NURSING HOMES

Street Address:

815 OLD CHEROKEE RD

LEXINGTON SC 29072

Participation:

# of Beds: Type of Ownership: Survey Date:

MEDICARE/MEDICAID SNF/ICF

319

PROPRIETARY

04/29/88

Total Residents on Day of Survey:	Medicare Residents:	Medicald Residents:						
313	4 25		256			256		
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		#	%	%	%			
Bathing								
Residents requiring some or total assista	ance in bathing.	266	85.0	86.1	81.5			
Dressing								
Residents requiring some or total assista	ance in dressing.	282	90.1	90.6	83.2			
Toileting								
Residents requiring some or total assista	ance in toileting.	255	81.5	82.6	73.8			
Transferring			į					
Residents requiring some or total assists tub or toilet.	ance moving from bed to chair or to	252	80.5	81.4	77.2			
Continence								
Residents with catheters or partial or total loss of bowel or bladder control.		262	83.7	74.3	68.2			
Residents on individually written bowel a	and bladder retraining program.	11	3.5	4.2	4.6			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	158	50.5	45.2	37.7			
Completely bedfast residents.		46	14.7	4.2	3.4			
Residents confined to chairs.		183	58.5	61.6	50.8			
£								
Residents requiring restraints.		123	39.3	43.9	41.3			
Confused or disoriented residents.		179	57.2	69.6	58.4			
Residents with bed sores.		22	7.0	7.0	7.1			
Residents receiving special skin care.		70	22.4	40.8	31.2			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A			R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE LORIS COMMUNITY HOSP NH

	IIIO OOMINIO	INI I IIOSI INI	
Street Address:		City and State:	
3655 MITCHELL ST		LORIS SC 29569	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	40	NON-PROFIT OTHER	05/20/88

SELECTEL	RESIDENT CHARACTERIST	105				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
37	1		30			
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	32	86.5	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	34	91.9	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	34	91.9	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	29	78.4	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	29	78.4	74.3	68.2	
Residents on individually written bowel	and bladder retraining program.	3	8.1	4.2	4.6	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	15	40.5	45.2	37.7	
Completely bedfast residents.		5	13.5	4.2	3.4	
Residents confined to chairs.		22	59.5	61.6	50.8	
Residents requiring restraints.		27	73.0	43.9	41.3	
Confused or disoriented residents.		21	56.8	69.6	58.4	
Residents with bed sores.		4	10.8	7.0	7.1	
Residents receiving special skin care.		34	91.9	40.8	31.2	

was deficient in the indicated area at the time of the survey.					
<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FA REQUIREM	
		STATE		NAT	ION
deficiency may represent an ongoing problem of a one-time failure of a single stail person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		LITY NUMBER & PERCENT OF FACILITY  NOT MEETING REQUIREMENT				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NA <sup>-</sup>	ΓΙΟΝ	
deficiency may represent an originity problem of a one-time failure of a single start person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	

#### NURSING HOME PROFILE BRIGGS NH

	Billide	40 IIII	
Street Address:	-	City and State:	
RT 3		MANNING SC 29102	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	64	PROPRIETARY	02/12/88

JELEO I EL	RESIDENT CHARACTERIST	103					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
64	1	62					
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	59	92.2	86.1	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	63	98.4	90.6	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	59	92.2	82.6	73.8		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	59	92.2	81.4	77.2		
Continence							
Residents with catheters or partial or total loss of bowel or bladder control.		48	75.0	74.3	68.2		
Residents on individually written bowel a	and bladder retraining program.	4	6.3	4.2	4.6		
Eating							
Residents receiving tube feedings or red	quiring assistance with eating.	16	25.0	45.2	37.7		
Completely bedfast residents.		1	1.6	4.2	3.4		
Residents confined to chairs.		25	39.1	61.6	50.8		
Residents requiring restraints.		43	67.2	43.9	41.3		
Confused or disoriented residents.		47	73.4	69.6	58.4		
Residents with bed sores.		6	9.4	7.0	7.1		
					- <del>-</del>		
Residents receiving special skin care.		64	100	40.8	31.2		
				1			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	TION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITY NOT MEETING REQUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	МЕТ	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

### NURSING HOME PROFILE

Street Address: City and State:					
Street Address:		City and State:			
HIGHWAY 276 BOX 216		MARIETTA SC 29661			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICAID ICF	44	NON-PROFIT OTHER	03/04/88		

SELECTEL	RESIDENT CHARACTERIST	105				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
41	41 0			36		
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	3	7.3	74.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	34	82.9	79.3	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting.	20	48.8	61.9	63.4	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	16	39.0	63.3	66.0	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.		23	56.1	54.5	59.1	
Residents on individually written bowel	and bladder retraining program.	0	0.0	3.6	6.1	
Eating						
Residents receiving tube feedings or re-	quiring assistance with eating.	9	22.0	17.7	29.3	
Completely bedfast residents.		0	0.0	0.6	3.6	
Residents confined to chairs.		6	14.6	24.8	39.1	
Residents requiring restraints.		4	9.8	18.6	31.7	
Confused or disoriented residents.		25	61.0	58.2	55.8	
Residents with bed sores.		1	2.4	2.7	4.7	
Residents receiving special skin care.		10	24.4	14.3	24.0	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET/ NOT	ST	ATE	NAT	LION	
denoted thay represent an originity problem of a one-time failure of a single stan person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6	
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITI NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	
	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

### NURSING HOME PROFILE JENKINS NH

Street Address:		City and State:	-
401 MURRAY ST		MARION SC 29571	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	58	PROPRIETARY	09/11/87

SELECTEL	RESIDENT CHARACTERIST	ics				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
58	0		57			
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate car-		FAC	ILITY	STATE	NATION	
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	44	75.9	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	48	82.8	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	43	74.1	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	43	74.1	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	41	70.7	74.3	68.2	
Residents on individually written bowel	and bladder retraining program.	0	0.0	4.2	4.6	
Eating	3, 3					
Residents receiving tube feedings or rec	quiring assistance with eating.	22	37.9	45.2	37.7	
Completely bedfast residents.		1	1.7	4.2	3.4	
- Completely Bounder residents.						
Residents confined to chairs.		40	69.0	61.6	50.8	
incordents commet to origins.						
Residents requiring restraints.		35	60.3	43.9	41.3	
nesidents requiring restraints.						
Confused or discrimited residents		24	41.4	69.6	58.4	
Confused or disoriented residents.		<u>-</u>	111.7			
Decidents with had care		6	10.3	7.0	7.1	
Residents with bed sores.	in the second se		10.0	7.0	7.1	
Builde de march to a final to the		37	63.8	40.8	31.2	
Residents receiving special skin care.		37	03.6	40.6	31.2	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERC MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NA <sup>-</sup>	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	МЕТ	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FAC NOT MEETING REQUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE MARION CO CONVALESCENT CENTER

Street Address:		City and State:	
PO DRAWER 1106		MARION SC 29571	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	02/26/88

FAC	aid Resi	3 STATE	NATION
#	ILITY	STATE	NATION
#	1		
67		%	%
67			
67	83.7	86.1	81.5
77	96.2	90.6	83.2
	-		
67	83.7	82.6	73.8
73	91.2	81.4	77.2
71	88.7	74.3	68.2
1	1.2	4.2	4.6
37	46.2	45.2	37.7
2	2.5	4.2	3.4
55	68.8	61.6	50.8
39	48.7	43.9	41.3
53	66.2	69.6	58.4
10	12.5	7.0	7.1
44	55.0	40.8	31.2
	67 73 71 1 37 2 55 39 53	67 83.7  73 91.2  71 88.7  1 1.2  37 46.2  2 2.5  55 68.8  39 48.7  53 66.2  10 12.5	67     83.7     82.6       73     91.2     81.4       71     88.7     74.3       1     1.2     4.2       37     46.2     45.2       2     2.5     4.2       55     68.8     61.6       39     48.7     43.9       53     66.2     69.6       10     12.5     7.0

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements acility must meet. There are over 500 separate requirements. The information presente sellow does not reflect the severity or the duration of the problems leading to a deficiency.				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

#### NURSING HOME PROFILE BERKELEY CONVALESCENT CENTER

Street Address: City and State:			
505 S LIVE OAK DR		MONCKS CORNER SC 294	61
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	132	PROPRIETARY	06/25/87

	RESIDENT CHARACTERIST				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
130	0	109			
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate car-		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may remet the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	109	83.8	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	117	90.0	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	106	81.5	82.6	73.8
Transferring					-
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	110	84.6	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	103	79.2	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	53	40.8	45.2	37.7
Completely bedfast residents.		12	9.2	4.2	3.4
Residents confined to chairs.		62	47.7	61.6	50.8
Residents requiring restraints.		67	51.5	43.9	41.3
Confused or disoriented residents.		78	60.0	69.6	58.4
Residents with bed sores.		22	16.9	7.0	7.1
Residents receiving special skin care.		9	6.9	40.8	31.2

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the soverity of the duration of the problems leading to a deficiency.		NUMBER & PERCENT OF FA			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	TION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	мет	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NA <sup>-</sup>	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	МЕТ	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	МЕТ	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

#### NURSING HOME PROFILE COOPER HALL NURSING CENTER

Street Address:	City and State:			
921 BOWMAN RD BOX 1026		MOUNT PLEASANT SC 29464		
Participation:	pation: # of Beds: Type of Ownership:		Survey Date:	
MEDICARE/MEDICAID SNF/ICF	132	PROPRIETARY	02/05/88	

RESIDENT CHARACTERIST	ICS				
Medicare Residents:	Medicaid Residents:				
0		66			
cteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
e. It may reflect the facility's ability to provide	#	%	%	%	
			ł		
ance in bathing.	114	92.7	86.1	81.5	
ance in dressing.	112	91.1	90.6	83.2	
ance in toileting.	111	90.2	82.6	73.8	
and the state of t					
Residents requiring some or total assistance moving from bed to chair or to tub or toilet.			81.4	77.2	
tal loss of bowel or bladder control.	102	82.9	74.3	68.2	
and bladder retraining program.	0	0.0	4.2	4.6	
quiring assistance with eating.	52	42.3	45.2	37.7	
	4	3.3	4.2	3.4	
	83	67.5	61.6	50.8	
	42	34.1	43.9	41.3	
	77	62.6	69.6	58.4	
	12	9.8	7.0	7.1	
	41	33.3	40.8	31.2	
	Medicare Residents:  0  cteristics does not indicate whether those e. It may reflect the facility's ability to provide  ance in bathing.  ance in dressing.  ance in toileting.  ance moving from bed to chair or to  tal loss of bowel or bladder control.  and bladder retraining program.	teristics does not indicate whether those e. It may reflect the facility's ability to provide  ance in bathing.  114  ance in dressing.  112  ance in toileting.  111  ance moving from bed to chair or to  108  tal loss of bowel or bladder control.  102  and bladder retraining program.  0  quiring assistance with eating.  52  4  83  42  77	Medicare Residents:  0 cteristics does not indicate whether those e. It may reflect the facility's ability to provide  # % ance in bathing.  114 92.7  ance in dressing.  112 91.1  ance in toileting.  111 90.2  ance moving from bed to chair or to  108 87.8  tal loss of bowel or bladder control.  102 82.9  and bladder retraining program.  0 0.0  quiring assistance with eating.  52 42.3  43.3  83 67.5  42 34.1  77 62.6	Medicare Residents:         Medicaid Residents:           0         66           cteristics does not indicate whether those e. It may reflect the facility's ability to provide         FACILITY         STATE           #         %         %           ance in bathing.         114         92.7         86.1           ance in dressing.         112         91.1         90.6           ance in toileting.         111         90.2         82.6           ance moving from bed to chair or to         108         87.8         81.4           tal loss of bowel or bladder control.         102         82.9         74.3           and bladder retraining program.         0         0.0         4.2           quiring assistance with eating.         52         42.3         45.2           83         67.5         61.6           42         34.1         43.9           77         62.6         69.6           12         9.8         7.0	

was delicient in the indicated area at the time of the survey.	1 1					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented selected the resolution of the problems leading to a deficiency.		NUMBER & PERCENT OF NOT MEETING REOUIR			REMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE		+	ION	
The state of the s		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	NOT MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6	
			-	L.		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		TY NUMBER & PERCENT OF NOT MEETING REQUI				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE SANDPIPER CONVALESCENT CENTER INC

Street Address:		City and State:		
1049 ANNA KNAPP BLVD		MOUNT PLEASANT SC 29464		
Participation:	# of Beds:	Type of Ownership:	Survey Date:	
MEDICARE/MEDICAID SNF/ICF	132	PROPRIETARY	05/29/87	

Medicare Posidents	Modio	oid Booi	donto		
Medicare Residents:	iviedicaid nesidents.				
122 0		7	0		
	FAC		STATE	NATION	
	#	%	%	%	
ance in bathing.	119	97.5	86.1	81.5	
ance in dressing.	115	94.3	90.6	83.2	
<u> </u>					
ance in toileting.	106	86.9	82.6	73.8	
ance moving from bed to chair or to	94	77.0	81.4	77.2	
Residents with catheters or partial or total loss of bowel or bladder control.		82.8	74.3	68.2	
and bladder retraining program.	0	0.0	4.2	4.6	
*					
quiring assistance with eating.	52	42.6	45.2	37.7	
	9	7.4	4.2	3.4	
	65	53.3	61.6	50.8	
	28	23.0	43.9	41.3	
	98	80.3	69.6	58.4	
	9	7.4	7.0	7.1	
	122	100	40.8	31.2	
	cheristics does not indicate whether those e. It may reflect the facility's ability to provide ance in bathing.  ance in dressing.  ance in toileting.  ance moving from bed to chair or to	tetristics does not indicate whether those and it may reflect the facility's ability to provide #  ance in bathing.  119  ance in dressing.  115  ance in toileting.  106  ance moving from bed to chair or to  94  tal loss of bowel or bladder control.  101  and bladder retraining program.  4  9  65  28  98	0 70 FACILITY # %  ance in bathing. 119 97.5  ance in toileting. 106 86.9  ance moving from bed to chair or to 94 77.0  tal loss of bowel or bladder control. 101 82.8  and bladder retraining program. 0 0.0  and bladder retraining program. 52 42.6  9 7.4  65 53.3  28 23.0  98 80.3	0 70  cteristics does not indicate whether those a. It may reflect the facility's ability to provide # % %  ance in bathing. 119 97.5 86.1  ance in dressing. 115 94.3 90.6  ance in toileting. 106 86.9 82.6  ance moving from bed to chair or to 94 77.0 81.4  tal loss of bowel or bladder control. 101 82.8 74.3  and bladder retraining program. 0 0.0 4.2  and bladder retraining program. 52 42.6 45.2  9 7.4 4.2  65 53.3 61.6  28 23.0 43.9  98 80.3 69.6	

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILINOT MEETING REQUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
eficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NOT MEETING DECUM				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		+	TION	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging n normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
solation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE COVENANT TOWERS

	COVENAN	IIOWENS	
Street Address:		City and State:	
5001 OLD LITTLE RIVER RD		MYRTLE BEACH SC 29577	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE SNF/ICF	30	NON-PROFIT OTHER	02/24/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
4	0				
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	4	100	86.1	81.5
Dressing	3				
Residents requiring some or total assista	ance in dressina.	3	75.0	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	3	75.0	82.6	73.8
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	3	75.0	81.4	77.2
Continence					
Residents with catheters or partial or tot	tal loss of bowel or bladder control.	2	50.0	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	0	0.0	45.2	37.7
Completely bedfast residents.		11	25.0	4.2	3.4
Residents confined to chairs.		0	0.0	61.6	50.8
Residents requiring restraints.		0	0.0	43.9	41.3
Confused or disoriented residents.		0	0.0	69.6	58.4
Residents with bed sores.		0	0.0	7.0	7.1
Residents receiving special skin care.		2	50.0	40.8	31.2

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	FACILITIES REMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A		ST	STATE		ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents'						
personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	мет	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE		NATION	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
and tube reeding.	MEI	47	41.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	МЕТ	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE MYRTLE BEACH MANOR

Street Address:		City and State:				
9601 N KINGS HWY BOX 7337		MYRTLE BEACH SC 29577				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICARE/MEDICAID SNF/ICF	50	PROPRIETARY	05/18/88			

SELECTED RESIDENT CHARACTERISTICS							
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resid	dents:			
40	0	15					
Caution: A large number of residents with these characteristics are receiving appropriate or incorporate care		FACILITY		STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	3. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	38	95.0	86.1	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	38	95.0	90.6	83.2		
Toileting							
Residents requiring some or total assista	ance in toileting.	35	87.5	82.6	73.8		
Transferring							
Residents requiring some or total assistation tub or toilet.	ance moving from bed to chair or to	34	85.0	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	35	87.5	74.3	68.2		
·							
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6		
Eating	<u> </u>						
Residents receiving tube feedings or rec	auirina assistance with eating.	14	35.0	45.2	37.7		
Completely bedfast residents.		2	5.0	4.2	3.4		
Residents confined to chairs.		28	70.0	61.6	50.8		
Tradition to the state of the s							
Residents requiring restraints.		17	42.5	43.9	41.3		
Tresidents requiring restraints.							
Confused or disoriented residents.		17	42.5	69.6	58.4		
Contacts of discrimined residents.							
Residents with bed sores.		2	5.0	7.0	7.1		
Troduction with bod defect.							
Residents receiving special skin care.		4	10.0	40.8	31.2		
nesidents receiving special skill care.							

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERC MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	NAT	TION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	1107 11557110 0501				
elow does not reflect the severity or the duration of the problems leading to a deficiency. A eficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT	LION	
		#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE SANDSTROM HOME

SANDSTITUTE TO THE SANDSTITUTE T							
Street Address:		City and State:					
PO BOX 7187		MYRTLE BEACH SC 29577					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICAID ICF	30	NON-PROFIT OTHER	03/23/88				

SELECTEL	RESIDENT CHARACTERIST	103					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
30	0	28					
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	28	93.3	74.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	28	93.3	79.3	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	24	80.0	61.9	63.4		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	22	73.3	63.3	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	20	66.7	54.5	59.1		
Residents on individually written bowel a	and bladder retraining program.	0	0.0	3.6	6.1		
Eating							
Residents receiving tube feedings or red	quiring assistance with eating.	8	26.7	17.7	29.3		
Completely bedfast residents.		0	0.0	0.6	3.6		
Residents confined to chairs.		22	73.3	24.8	39.1		
Residents requiring restraints.		4	13.3	18.6	31.7		
Confused or disoriented residents.		13	43.3	58.2	55.8		
			0.0	0.7	4.7		
Residents with bed sores.		0	0.0	2.7	4.7		
		_	10.7	140	24.0		
Residents receiving special skin care.		5	16.7	14.3	24.0		

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERC MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NA-	LION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.		0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8	

# NURSING HOME PROFILE NEW ELLENTON GERIATRIC CENTER

	HEW ELECTION GENTATIO CENTER							
Street Address:		City and State:						
302 MAIN ST N E		NEW ELLENTON SC 2980	1					
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICAID ICF	26	PROPRIETARY	07/01/87					

SELECTED	RESIDENT CHARACTERIST	ICS			
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
21	0	19			
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	6	28.6	74.2	78.3
Dressing				7	
Residents requiring some or total assist	ance in dressing.	21	100	79.3	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	12	57.1	61.9	63.4
Transferring  Residents requiring some or total assist.	ance moving from had to chair or to				
tub or toilet.	ance moving from bed to chall of to	12	57.1	63.3	66.0
Continence		:			
Residents with catheters or partial or to	tal loss of bowel or bladder control.	12	57.1	54.5	59.1
Residents on individually written bowel a	and bladder retraining program.	0	0.0	3.6	6.1
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	3	14.3	17.7	29.3
Completely bedfast residents.		0	0.0	0.6	3.6
Residents confined to chairs.		2	9.5	24.8	39.1
Residents requiring restraints.		0	0.0	18.6	31.7
Confused or disoriented residents.		10	47.6	58.2	55.8
Residents with bed sores.		2	9.5	2.7	4.7
				-	
Residents receiving special skin care.		4	19.0	14.3	24.0

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			CENT OF FACILITIES G REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6	
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	4	16.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	10	40.0	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	МЕТ	2	8.0	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REOUIREMENTS				
elow does not reflect the severity or the duration of the problems leading to a deficiency. A eficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE			TON	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	4	16.0	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	3	12.0	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	МЕТ	7	28.0	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	6	24.0	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	NOT MET	5	20.0	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	6	24.0	2452	44.8	

# NURSING HOME PROFILE J F HAWKINS NH

J F HAWKIIIS INI							
Street Address:		City and State:					
1330 KINARD ST		NEWBERRY SC 29108					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	78	LOCAL GOVERNMENT	11/13/87				

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:								
77	0	47						
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assista	ance in bathing.	72	93.5	86.1	81.5			
Dressing								
Residents requiring some or total assista	ance in dressing.	72	93.5	90.6	83.2			
Toileting								
Residents requiring some or total assista	ance in toileting.	66	85.7	82.6	73.8			
Transferring								
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	67	87.0	81.4	77.2			
Continence								
Residents with catheters or partial or tot	al loss of bowel or bladder control.	52	67.5	74.3	68.2			
Residents on individually written bowel a	and bladder retraining program.	5	6.5	4.2	4.6			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	42	54.5	45.2	37.7			
				10 mg				
Completely bedfast residents.		8	10.4	4.2	3.4			
Residents confined to chairs.		27	35.1	61.6	50.8			
Residents requiring restraints.		26	33.8	43.9	41.3			
Confused or disoriented residents.		62	80.5	69.6	58.4			
Residents with bed sores.		1	1.3	7.0	7.1			
Residents receiving special skin care.		9	11.7	40.8	31.2			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACI NOT MEETING REQUIREMEN			
			ATE	+	ION
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the equation of the problems leading to a deficiency.					T OF FACILITIES QUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION	
	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE NEWBERRY CONVALESCENT HOME

Street Address:		City and State:	
KINARD ST		NEWBERRY SC 29108	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	62	NON-PROFIT OTHER	06/10/87

SELECTED	RESIDENT CHARACTERIST	ICS			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
61	o		4	5	
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car.		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	53	86.9	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	50	82.0	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	44	72.1	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	45	73.8	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	31	50.8	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	1	1.6	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	21	34.4	45.2	37.7
Completely bedfast residents.		0	0.0	4.2	3.4
Residents confined to chairs.		35	57.4	61.6	50.8
Residents requiring restraints.		20	32.8	43.9	41.3
Confused or disoriented residents.		30	49.2	69.6	58.4
Residents with bed sores.		2	3.3	7.0	7.1
Residents receiving special skin care.		15	24.6	40.8	31.2
		4-			-

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILI' NOT MEETING REQUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NAT	ION
eficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA	
		ST	STATE		ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	мет	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	МЕТ	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	МЕТ	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	мет	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	МЕТ	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8
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# NURSING HOME PROFILE ANNE MARIA MEDICAL CARE NH INC

Street Address:		City and State:	
TALISMAN DR		NORTH AUGUSTA SC 298	341
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	PROPRIETARY	03/10/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:						
117	117 0			39				
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		FACILITY		STATE	NATION			
highly specialized care and services.		#	%	%	%			
Bathing								
Residents requiring some or total assista	ance in bathing.	89	76.1	86.1	81.5			
Dressing								
Residents requiring some or total assista	ance in dressing.	87	74.4	90.6	83.2			
Toileting								
Residents requiring some or total assista	ance in toileting.	70	59.8	82.6	73.8			
Transferring								
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	73	62.4	81.4	77.2			
Continence								
Residents with catheters or partial or tot	al loss of bowel or bladder control.	63	53.8	74.3	68.2			
Residents on individually written bowel a	and bladder retraining program.	1	0.9	4.2	4.6			
Eating								
Residents receiving tube feedings or req	uiring assistance with eating.	25	21.4	45.2	37.7			
Completely bedfast residents.		0	0.0	4.2	3.4			
Residents confined to chairs.		58	49.6	61,6	50.8			
Residents requiring restraints.		38	32.5	43.9	41.3			
Confused or disoriented residents.		79	67.5	69.6	58.4			
Residents with bed sores.		2	1.7	7.0	7.1			
Residents receiving special skin care.		36	30.8	40.8	31.2			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			NUMBER & PERCEN NOT MEETING RI		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION
	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	мет	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	мет	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	МЕТ	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	МЕТ	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8
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# NURSING HOME PROFILE EDISTO CONVALESCENT CENTER

Street Address:		City and State:	
500 ENTERPRISE ST SW		ORANGEBURG SC 29115	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	86	PROPRIETARY	02/05/88

SELECTEL	RESIDENT CHARACTERIST	103					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
83			56				
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	79	95.2	86.1	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	83	100	90.6	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	76	91.6	82.6	73.8		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	73	88.0	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	72	86.7	74.3	68.2		
Residents on individually written bowel	and bladder retraining program.	0	0.0	4.2	4.6		
Eating	<u> </u>						
Residents receiving tube feedings or rec	quiring assistance with eating.	29	34.9	45.2	37.7		
Completely bedfast residents.		0	0.0	4.2	3.4		
Residents confined to chairs.		50	60.2	61.6	50.8		
Residents requiring restraints.		50	60.2	43.9	41.3		
Confused or disoriented residents.		54	65.1	69.6	58.4		
Residents with bed sores.		3	3.6	7.0	7.1		
Residents receiving special skin care.		8	9.6	40.8	31.2		
Trestucints receiving special skill care.		I			l		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.			ATE		ION
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NOT MEETING REOUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT	ION
deficiency may represent an origonity problem of a offe-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE JOLLEY ACRES NH

	OLLLIA	OHEO MH	
Street Address:		City and State:	
PO DRAWER 1909		ORANGEBURG SC 29115	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	43	PROPRIETARY	11/25/87

SELECTED	RESIDENT CHARACTERIST	ics						
Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:								
41	0		3	16				
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	41	100	86.1	81.5			
Dressing								
Residents requiring some or total assist	ance in dressing.	36	87.8	90.6	83.2			
Toileting								
Residents requiring some or total assist	ance in toileting.	35	85.4	82.6	73.8			
Transferring								
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	36	87.8	81.4	77.2			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	35	85.4	74.3	68.2			
· · · · · · · · · · · · · · · · · · ·								
Residents on individually written bowel	and bladder retraining program.	1	2.4	4.2	4.6			
Eating	3, 3							
Residents receiving tube feedings or rec	quiring assistance with eating.	21	51.2	45.2	37.7			
Completely bedfast residents.		0	0.0	4.2	3.4			
Residents confined to chairs.		37	90.2	61.6	50.8			
Residents requiring restraints.		24	58.5	43.9	41.3			
Confused or disoriented residents.		32	78.0	69.6	58.4			
Residents with bed sores.		4	9.8	7.0	7.1			
Residents receiving special skin care.		14	34.1	40.8	31.2			
ricoldenta receiving special skill care.				I	L			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS		
elow does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
eficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6
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Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.			MBER & PERCENT ( NOT MEETING REQU			
		STATE		NATION		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	мет	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	МЕТ	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	МЕТ	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE ORANGEBURG NH

0.0.000							
Street Address:		City and State:					
755 WHITMAN ST		ORANGEBURG SC 29115					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	12/11/87				

SELECTEL	RESIDENT CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
72	72					
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car		FAC	ILITY	STATE	NATION	
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	69	95.8	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	68	94.4	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	62	86.1	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	67	93.1	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	50	69.4	74.3	68.2	
Residents on individually written bowel	and bladder retraining program.	1	1.4	4.2	4.6	
Eating	<u> </u>					
Residents receiving tube feedings or re-	quiring assistance with eating.	28	38.9	45.2	37.7	
Completely bedfast residents.		2	2.8	4.2	3.4	
Residents confined to chairs.		40	55.6	61.6	50.8	
Residents requiring restraints.		55	76.4	43.9	41.3	
Confused or disoriented residents.		41	56.9	69.6	58.4	
Communication of discrimination residents.						
Residents with bed sores.		16	22.2	7.0	7.1	
ricoldento with bed soles.						
Residents receiving special skin care.		41	56.9	40.8	31.2	
nesidents receiving special skin care.						

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NOT MEETING REQUIREMENT				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				OF FACILITIES PIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A		ST	ATE	NAT	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
	IVIET	- 55	31.0	2045	21.0	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	МЕТ	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

### NURSING HOME PROFILE THE METHODIST HOME

THE METHODIST HOME						
Street Address:		City and State:				
PO DRAWER 327		ORANGEBURG SC 29115				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICARE/MEDICAID SNF/ICF	132	NON-PROFIT RELIGIOUS	04/08/88			

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:							
121	5						
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assista	ance in bathing.	111	91.7	86.1	81.5		
Dressing							
Residents requiring some or total assista	ance in dressing.	112	92.6	90.6	83.2		
Toileting							
Residents requiring some or total assista	ance in toileting.	96	79.3	82.6	73.8		
Transferring							
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	95	78.5	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	73	60.3	74.3	68.2		
Residents on individually written bowel a	and bladder retraining program.	1	0.8	4.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	44	36.4	45.2	37.7		
Completely bedfast residents.		2	1.7	4.2	3.4		
Residents confined to chairs.		67	55.4	61.6	50.8		
Residents requiring restraints.		78	64.5	43.9	41.3		
Confused or disoriented residents.		75	62.0	69.6	58.4		
		_	4.4	7.0	7.1		
Residents with bed sores.		5	4.1	7.0	7.1		
			45.5	40.0	24.0		
Residents receiving special skin care.		55	45.5	40.8	31.2		

was delicioned in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FA			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NA <sup>-</sup>	ΓΙΟΝ
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	ST #	ATE %	NAT	ION %
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

# NURSING HOME PROFILE LAUREL HILL NURSING CENTER INC

Street Address:		City and State:	
601 E CEDAR ROCK ST		PICKENS SC 29671	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	80	PROPRIETARY	01/27/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
78	1		6	66		
Caution: A large number of residents with these characteristics		FACILITY		STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing				* .		
Residents requiring some or total assist	ance in bathing.	62	79.5	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	69	88.5	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	67	85.9	82.6	73.8	
Transferring	<u>-</u>					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	69	88.5	81.4	77.2	
Continence				-		
Residents with catheters or partial or to	tal loss of bowel or bladder control.	59	75.6	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	4	5.1	4.2	4.6	
Eating				. **		
Residents receiving tube feedings or red	quiring assistance with eating.	47	60.3	45.2	37.7	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		44	56.4	61.6	50.8	
				9		
Residents requiring restraints.		52	66.7	43.9	41.3	
Confused or disoriented residents.		59	75.6	69.6	58.4	
				-		
Residents with bed sores.		12	15.4	7.0	7.1	
Residents receiving special skin care.		16	20.5	40.8	31.2	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	/ NUMBER & PERCENT OF FAC			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6
					4

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				PERCENT OF FACILITIES ETING REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	MET	#	%	#	%
and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE MCKINNEY ICF

WICKINNETICF						
Street Address:		City and State:				
113 ROSEMOND ST		PICKENS SC 29671	·			
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICF	44	NON-PROFIT PRIVATE	07/29/87			

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
44	0	39			
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	41	93.2	74.2	78.3
Dressing					=
Residents requiring some or total assista	ance in dressing.	37	84.1	79.3	76.7
Toileting	3				**
Residents requiring some or total assista	ance in toileting.	37	84.1	61.9	63.4
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	18	40.9	63.3	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	39	88.6	54.5	59.1
Residents on individually written bowel a	and bladder retraining program.	0	0.0	3.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	16	36.4	17.7	29.3
Completely bedfast residents.		0	0.0	0.6	3.6
Residents confined to chairs.		15	34.1	24.8	39.1
Residents requiring restraints.		3	6.8	18.6	31.7
					-
Confused or disoriented residents.		2	4.5	58.2	55.8
		_	0.0	0.7	4.7
Residents with bed sores.		0	0.0	2.7	4.7
			0.0	14.3	24.0
Residents receiving special skin care.	ALAM.	0	0.0	14.3	24.0

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented				OF FACILITIES UIREMENTS		
elow does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6	
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	_0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	МЕТ	2	8.0	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	10	40.0	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A			NUMBER & PERCE NOT MEETING F		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.		6	24.0	2452	44.8

#### NURSING HOME PROFILE RIDGECREST CONVALESCENT CENTER

1110 012 01		TIBEL OF THE PARTY	
Street Address:		City and State:	
GRAYS RD		RIDGELAND SC 29936	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	11/13/87

	RESIDENT CHARACTERIS	103					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
87	87 0		85				
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate car highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	70	80.5	86.1	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	78	89.7	90.6	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	71	81.6	82.6	73.8		
Transferring	3						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	65	74.7	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	65	74.7	74.3	68.2		
Residents on individually written bowel	and bladder retraining program.	0	0.0	4.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	40	46.0	45.2	37.7		
Completely bedfast residents.		1	1.1	4.2	3.4		
Residents confined to chairs.		28	32.2	61.6	50.8		
Residents requiring restraints.		21	24.1	43.9	41.3		
Confused or disoriented residents.		63	72.4	69.6	58.4		
Residents with bed sores.		7	8.0	7.0	7.1		
Residents receiving special skin care.		28	32.2	40.8	31.2		
a parising of the state of the							

inder: These 32 selected performance indicators do not represent all the requirements a y must meet. There are over 500 separate requirements. The information presented y does not reflect the severity or the duration of the problems leading to a deficiency. A	FACILITY MET/		CILITIES ENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT		ATE	NAT	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.		0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	NOT MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

minder: These 32 selected performance indicators do not represent all the requirements a lility must meet. There are over 500 separate requirements. The information presented only does not reflect the according to the problems leading to the problems.				ENT OF FA REQUIREM	FACILITIES REMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

## NURSING HOME PROFILE FAIRFIELD HOMES INC

	I AIIII IEED	HOMES HAD	
Street Address:		City and State:	
PO DRAWER 157		RIDGEWAY SC 29130	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	112	NON-PROFIT PRIVATE	05/29/87

SELECTEL	RESIDENI CHARACTERIST	162			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
108	0		6		
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	103	95.4	86.1	81.5
Dressing			į		
Residents requiring some or total assist	ance in dressing.	94	87.0	90.6	83.2
Toileting	-				
Residents requiring some or total assista	ance in toileting.	79	73.1	82.6	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	85	78.7	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	72	66.7	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	5	4.6	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	60	55.6	45.2	37.7
Completely bedfast residents.		2	1.9	4.2	3.4
Residents confined to chairs.		44	40.7	61.6	50.8
Residents requiring restraints.		15	13.9	43.9	41.3
Confused or disoriented residents.		61	56.5	69.6	58.4
		8	7.4	7.0	7.1
Residents with bed sores.		0	7.4	7.0	-
		19	17.6	40.8	31.2
Residents receiving special skin care.		19	17.0	40.0	01.2

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				NT OF FACILITIES EQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	·518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/			1	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE %		NAT	ION %
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	NOT MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

NURSING HOME PROFILE
TANGLEWOOD HEALTH CARE CTR ICF

Street Address:		City and State:		
PO BOX 68		RIDGEWAY SC 29130		
Participation:	# of Beds:	Type of Ownership:	Survey Date:	
MEDICAID ICF	150	PROPRIETARY	03/18/88	

Total Residents on Day of Survey:  140  Caution: A large number of residents with these characteristics does not indicate whether those residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.  Bathing  Residents requiring some or total assistance in bathing.  Pressing  Residents requiring some or total assistance in dressing.  Toileting  Residents requiring some or total assistance in toileting.  Transferring  Residents requiring some or total assistance in toileting.  Transferring  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  86 61.4 54.5	**************************************
Caution: A large number of residents with these characteristics does not indicate whether those residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.  Bathing  Residents requiring some or total assistance in bathing.  Pressing  Residents requiring some or total assistance in dressing.  Toileting  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  Residents with catheters or partial or total loss of bowel or bladder control.	%
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.  # % %  Bathing  Residents requiring some or total assistance in bathing.  Pressing  Residents requiring some or total assistance in dressing.  Toileting  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance in toileting.  Pressing  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  86 61.4 54.5	%
Bathing  Residents requiring some or total assistance in bathing.  120 85.7 74.2  Dressing  Residents requiring some or total assistance in dressing.  118 84.3 79.3  Toileting  Residents requiring some or total assistance in toileting.  82 58.6 61.9  Transferring  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  86 61.4 54.5	
Residents requiring some or total assistance in bathing.  Pressing  Residents requiring some or total assistance in dressing.  Toileting  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance in toileting.  82 58.6 61.9  Transferring  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  87 62.1 63.3  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  86 61.4 54.5	78.3
Pressing  Residents requiring some or total assistance in dressing.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Residents with catheters or partial or total loss of bowel or bladder control.  86 61.4 54.5	78.3
Residents requiring some or total assistance in dressing.  Toileting  Residents requiring some or total assistance in toileting.  Transferring Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  84.3 79.3  61.9  62.1 63.3	
Toileting  Residents requiring some or total assistance in toileting.  82 58.6 61.9  Transferring Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  87 62.1 63.3  Continence Residents with catheters or partial or total loss of bowel or bladder control.  86 61.4 54.5	
Residents requiring some or total assistance in toileting.  Transferring Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence Residents with catheters or partial or total loss of bowel or bladder control.  82 58.6 61.9  83 62.1 63.3	76.7
Transferring Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence Residents with catheters or partial or total loss of bowel or bladder control.  86 61.4 54.5	
Transferring Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence Residents with catheters or partial or total loss of bowel or bladder control.  86 61.4 54.5	63.4
tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  87 62.1 63.3 63.3 64.1 63.3	
Continence  Residents with catheters or partial or total loss of bowel or bladder control.  86 61.4 54.5	66.0
Residents with catheters or partial or total loss of bowel or bladder control. 86 61.4 54.5	
	59.1
	59.1
Residents on individually written bowel and bladder retraining program.  9 6.4 3.6	6.1
Eating	
Residents receiving tube feedings or requiring assistance with eating. 29 20.7 17.7	29.3
Completely bedfast residents.	3.6
Residents confined to chairs. 47 33.6 24.8	39.1
Tresidents commed to chairs.	
Residents requiring restraints 23 16.4 18.6	31.7
Residents requiring restraints.	01.7
	55.0
Confused or disoriented residents. 73 52.1 58.2	55.8
Residents with bed sores. 5 3.6 2.7	4.7
Residents receiving special skin care. 47 33.6 14.3	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				OF FACILITIES JIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6	
Each resident is free from mental and physical abuse.		0	0.0	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	4	16.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	1	4.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.		2	8.0	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	10	40.0	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented select the severity or the duration of the problems leading to a deficiency.				ENT OF FACILITIES REOUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	TATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	мет	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

#### NURSING HOME PROFILE DOWDY GARDNER ROCK HILL ICF

DOWD! GAILDREIT HOOK TILL ICI			
Street Address:	1	City and State:	
101 SEDGEWOOD DR		ROCK HILL SC 29730	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID SNF/ICF	220	STATE GOVERNMENT	04/21/88

SELECTED RESIDENT CHARACTERISTICS							
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
213	0	193					
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	181	85.0	86.1	81.5		
Dressing							
Residents requiring some or total assistance in dressing.		193	90.6	90.6	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	153	71.8	82.6	73.8		
Transferring	ance moving from had to obein or to						
Residents requiring some or total assistance moving from bed to chair or to tub or toilet.			54.5	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	152	71.4	74.3	68.2		
Residents on individually written bowel	and bladder retraining program.	1	0.5	4.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	51	23.9	45.2	37.7		
Completely bedfast residents.		1	0.5	4.2	3.4		
Residents confined to chairs.		58	27.2	61.6	50.8		
Residents requiring restraints.		28	13.1	43.9	41.3		
Confused or disoriented residents.		208	97.7	69.6	58.4		
Residents with bed sores.		9	4.2	7.0	7.1		
Residents receiving special skin care.		44	20.7	40.8	31.2		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NOT	MEETING	ENT OF FA	ENTS
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET		ATE	+	ION
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	NOT MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

#### NURSING HOME PROFILE EBENEZER NH

Street Address:		City and State:						
111 SEDGEWOOD DR		ROCK HILL SC 29730						
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICARE SNF/ICF	37	PROPRIETARY	08/28/87					

SELECTEL	RESIDENT CHARACTERIST	165			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
33	0		(	0	
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	31	93.9	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	31	93.9	90.6	83.2
Toileting	3				
Residents requiring some or total assist	ance in toileting.	27	81.8	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	25	75.8	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	21	63.6	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	13	39.4	45.2	37.7
Completely bedfast residents.		4	12.1	4.2	3.4
Residents confined to chairs.		11	33.3	61.6	50.8
Residents requiring restraints.		13	39.4	43.9	41.3
Confused or disoriented residents.		13	39.4	69.6	58.4
Residents with bed sores.		2	6.1	7.0	7.1
Residents receiving special skin care.		2	6.1	40.8	31.2
nesidents receiving special skill care.		I	<u> </u>		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	∴ %
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.				ENT OF FACILITIES REOUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	мет	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE MAGNOLIA MANOR NORTH

WAGNOZIA WANON NORTH						
Street Address:		City and State:				
127 MURRAH DRIVE		ROCK HILL SC 29730				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICF	62	PROPRIETARY	07/22/87			

	RESIDENT CHARACTERIST		aid Danie	donto	
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
60	0		2	4	
Caution: A large number of residents with these characresidents are receiving appropriate or inappropriate care			ILITY	STATE	NATION
highly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	35	58.3	74.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	46	76.7	79.3	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	45	75.0	61.9	63.4
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	43	71.7	63.3	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	35	58.3	54.5	59.1
·					
Residents on individually written bowel	and bladder retraining program.	0	0.0	3.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	13	21.7	17.7	29.3
The second recording the second secon	quining disciplinates that g				
Completely bedfast residents.		3	5.0	0.6	3.6
completely sociate residents.					
Decidents confined to chaire		34	56.7	24.8	39.1
Residents confined to chairs.				2	
Partition to acceptate a management of		22	36.7	18.6	31.7
Residents requiring restraints.			00.7	10.0	011.7
		27	45.0	58.2	55.8
Confused or disoriented residents.		21	45.0	30.2	55.6
			F 0	0.7	4.7
Residents with bed sores.		3	5.0	2.7	4.7
			25.5		
Residents receiving special skin care.		14	23.3	14.3	24.0

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS		
	NOT	ST	STATE N		ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6	
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8	

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FA			
		STATE		_	ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET NOT MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

### NURSING HOME PROFILE MEADOW HAVEN NURSING CTR

MEADOW HAVEN NOTIONS OTT							
Street Address:		City and State:					
205 S HERLONG AVE		ROCK HILL SC 29730					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	132	PROPRIETARY	06/05/87				

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
130	O	94				
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car		FAC	ILITY	STATE	NATION	
highly specialized care and services.		#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	93	71.5	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	122	93.8	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	108	83.1	82.6	73.8	
Transferring	3					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	105	80.8	81.4	77.2	
Continence		100	00.0			
	tal lace of bound or bladder control	90	69.2	74.3	68.2	
Residents with catheters or partial or to	tal loss of bowel or bladder control.	30	05.2	74.5	00.2	
				4.0	4.0	
Residents on individually written bowel	and bladder retraining program.	0	0.0	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	50	38.5	45.2	37.7	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		53	40.8	61.6	50.8	
Residents requiring restraints.		59	45.4	43.9	41.3	
Confused or disoriented residents.		78	60.0	69.6	58.4	
Residents with bed sores.		4	3.1	7.0	7.1	
nesidents with Dea SUICS.						
Parising and the second state of the second st		96	73.8	40.8	31.2	
Residents receiving special skin care.			7 0.0	70.0	01.2	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERCI MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET/ NOT	STATE		NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	МЕТ	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an exercise problem are one time follows:		TY NUMBER & PERCE			
		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE ROCK HILL CONVALESCENT CENTER

Street Address:		City and State:			
1915 EBENEZER RD		ROCK HILL SC 29730			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE/MEDICAID SNF/ICF	141	PROPRIETARY	02/26/88		

SELECTEL	RESIDENT CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
140	140			08		
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	117	83.6	86.1	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	127	90.7	90.6	83.2	
Toileting						
Residents requiring some or total assista	ance in toileting.	119	85.0	82.6	73.8	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	118	84.3	81.4	77.2	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.			82.1	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	8	5.7	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	65	46.4	45.2	37.7	
Completely bedfast residents.		5	3.6	4.2	3.4	
Residents confined to chairs.		89	63.6	61.6	50.8	
Residents requiring restraints.		88	62.9	43.9	41.3	
Confused or disoriented residents.		78	55.7	69.6	58.4	
Residents with bed sores.		11	7.9	7.0	7.1	
Residents receiving special skin care.		37	26.4	40.8	31.2	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FA REOUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	NOT ST		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	МЕТ	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	NOT MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	

#### NURSING HOME PROFILE SALUDA NURSING CENTER

OALODA NONONIA OLIVILII							
Street Address:		City and State:					
RT 5 BOX 398		SALUDA SC 29138					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	132	LOCAL GOVERNMENT	08/27/87				

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
132	1		9	98	
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	97	73.5	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	113	85.6	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	108	81.8	82.6	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	106	80.3	81.4	77.2
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.		95	72.0	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	6	4.5	4.2	4.6
Eating					
Residents receiving tube feedings or req	uiring assistance with eating.	53	40.2	45.2	37.7
Completely bedfast residents.		6	4.5	4.2	3.4
Residents confined to chairs.		98	74.2	61.6	50.8
Residents requiring restraints.		76	57.6	43.9	41.3
Confused or disoriented residents.		86	65.2	69.6	58.4
Residents with bed sores.		2	1.5	7.0	7.1
Residents receiving special skin care.		54	40.9	40.8	31.2

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCE			
below does not reflect the severity or the duration of the problems leading to a deficiency. A		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	МЕТ	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	МЕТ	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	МЕТ	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERCI MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE		ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE LAKE CITY SCRANTON CONVALESCENT CTR

Street Address:		City and State:	
HIGH HILL ROAD		SCRANTON SC 29591	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	03/25/88

SELECIEL	RESIDENT CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
86	86 0		80			
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION	
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	80	93.0	86.1	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	82	95.3	90.6	83.2	
Toileting						
Residents requiring some or total assista	ance in toileting.	76	88.4	82.6	73.8	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	78	90.7	81.4	77.2	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.			91.9	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	2	2.3	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	37	43.0	45.2	37.7	
		-				
Completely bedfast residents.		2	2.3	4.2	3.4	
Residents confined to chairs.		74	86.0	61.6	50.8	
Residents requiring restraints.		62	72.1	43.9	41.3	
Confused or disoriented residents.		74	86.0	69.6	58.4	
Residents with bed sores.		7	8.1	7.0	7.1	
Residents receiving special skin care.		28	32.6	40.8	31.2	
		1				

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
		ST	ATE	NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	мет	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	мет	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	мет	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.					OF FACILITIES QUIREMENTS		
		STATE		NA <sup>-</sup>	TION		
		#	%	#	%		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9		
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6		
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6		
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0		
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7		
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2		
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6		
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6		
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4		
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9		
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0		
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9		
Resident care equipment is clean and maintained in safe operating condition.	NOT MET	6	5.3	1408	14.9		
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7		
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	3	2.7	700	7.4		
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8		

# NURSING HOME PROFILE LILA DOYLE NURSING CARE FACILITY

	1 1101101		
Street Address:		City and State:	
PO BOX 857		SENECA SC 29678	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	79	NON-PROFIT PRIVATE	08/06/87

residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.  Bathing  Residents requiring some or total assistance in bathing.  Residents requiring some or total assistance in dressing.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance in toileting.  Fasidents requiring some or total assistance in toileting.  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  Residents on individually written bowel and bladder retraining program.  Fasidents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.	SELECTEL	RESIDENT CHARACTERIST	105				
Caution: A large number of residents with these characteristics does not indicate whether those residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.  Bathing  Residents requiring some or total assistance in bathing.  Besidents requiring some or total assistance in dressing.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance in toileting.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  Residents on individually written bowel and bladder retraining program.  Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  51 71.4 69.6 5	Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.  Bathing  Residents requiring some or total assistance in bathing.  Residents requiring some or total assistance in dressing.  Residents requiring some or total assistance in dressing.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  Festidents on individually written bowel and bladder retraining program.  Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.	77 0			61			
Bathing  Residents requiring some or total assistance in bathing.  Residents requiring some or total assistance in dressing.  Residents requiring some or total assistance in dressing.  Residents requiring some or total assistance in dressing.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  Residents on individually written bowel and bladder retraining program.  Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents requiring restraints.  50 64.9 61.6 5  Residents requiring restraints.  55 71.4 69.6 5			FAC	ILITY	STATE	NATION	
Residents requiring some or total assistance in bathing.  Pressing  Residents requiring some or total assistance in dressing.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  Residents on individually written bowel and bladder retraining program.  Residents receiving tube feedings or requiring assistance with eating.  Residents confined to chairs.  Residents requiring restraints.  So 64.9 61.6 5  Residents requiring restraints.  So 72.7 43.9 4  Confused or disoriented residents.		e. It may reflect the facility's ability to provide	#	%	%	%	
Pesidents requiring some or total assistance in dressing.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance in toileting.  Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  Residents on individually written bowel and bladder retraining program.  Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  55 71.4 69.6 5  Confused or disoriented residents.	Bathing						
Residents requiring some or total assistance in dressing.  Toileting  Residents requiring some or total assistance in toileting.  Transferring Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  Feesidents on individually written bowel and bladder retraining program.  Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  55 71.4 69.6 5  Confused or disoriented residents.	Residents requiring some or total assist	ance in bathing.	69	89.6	86.1	81.5	
Toileting Residents requiring some or total assistance in toileting.  Fransferring Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence Residents with catheters or partial or total loss of bowel or bladder control.  Fresidents on individually written bowel and bladder retraining program.  Fresidents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  Fresidents confined to chairs.  Residents requiring restraints.  Fresidents requiring restraints.	Dressing						
Residents requiring some or total assistance in toileting.  Transferring Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence Residents with catheters or partial or total loss of bowel or bladder control.  Residents on individually written bowel and bladder retraining program.  Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents requiring restraints.  50 64.9 61.6 5  Residents requiring restraints.  55 71.4 69.6 5	Residents requiring some or total assist	ance in dressing.	66	85.7	90.6	83.2	
Transferring Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence Residents with catheters or partial or total loss of bowel or bladder control.  Residents on individually written bowel and bladder retraining program.  Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  55 71.4 69.6 5	Toileting						
Residents requiring some or total assistance moving from bed to chair or to tub or toilet.  Continence  Residents with catheters or partial or total loss of bowel or bladder control.  Residents on individually written bowel and bladder retraining program.  3 3.9 4.2  Eating  Residents receiving tube feedings or requiring assistance with eating.  1 1.3 4.2  Completely bedfast residents.  50 64.9 61.6 5  Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.	Residents requiring some or total assist	ance in toileting.	63	81.8	82.6	73.8	
tub or toilet. 71 92.2 81.4 7  Continence  Residents with catheters or partial or total loss of bowel or bladder control. 59 76.6 74.3 6  Residents on individually written bowel and bladder retraining program. 3 3.9 4.2  Eating  Residents receiving tube feedings or requiring assistance with eating. 31 40.3 45.2 3  Completely bedfast residents. 1 1.3 4.2  Residents confined to chairs. 50 64.9 61.6 5  Residents requiring restraints. 56 72.7 43.9 4  Confused or disoriented residents. 55 71.4 69.6 5							
Residents with catheters or partial or total loss of bowel or bladder control.  Residents on individually written bowel and bladder retraining program.  Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.		ance moving from bed to chair or to	71	92.2	81.4	77.2	
Residents on individually written bowel and bladder retraining program.  8 3 3.9 4.2  Eating  Residents receiving tube feedings or requiring assistance with eating.  9 31 40.3 45.2 33  Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.  57 71.4 69.6 5	Continence						
Eating  Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.	Residents with catheters or partial or to	tal loss of bowel or bladder control.	59	76.6	74.3	68.2	
Eating  Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.							
Residents receiving tube feedings or requiring assistance with eating.  Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.	Residents on individually written bowel a	and bladder retraining program.	3_	3.9	4.2	4.6	
Completely bedfast residents.  1 1.3 4.2  Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.  57 71.4 69.6 5	Eating						
Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.  57 71.4 69.6 5	Residents receiving tube feedings or rec	quiring assistance with eating.	31	40.3	45.2	37.7	
Residents confined to chairs.  50 64.9 61.6 5  Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.  57 71.4 69.6 5							
Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.  57 71.4 69.6 5	Completely bedfast residents.		1	1.3	4.2	3.4	
Residents requiring restraints.  56 72.7 43.9 4  Confused or disoriented residents.  57 71.4 69.6 5							
Confused or disoriented residents.  55 71.4 69.6 5	Residents confined to chairs.		50	64.9	61.6	50.8	
Confused or disoriented residents.  55 71.4 69.6 5							
de la confidence de la	Residents requiring restraints.		56	72.7	43.9	41.3	
de la confidence de la							
Residents with bed sores. 4 5.2 7.0	Confused or disoriented residents.		55	71.4	69.6	58.4	
Residents with bed sores. 4 5.2 7.0							
	Residents with bed sores.		4	5.2	7.0	7.1	
Residents receiving special skin care. 33 42.9 40.8 3	Residents receiving special skin care.		33	42.9	40.8	31.2	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
		STATE # %		NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILIT NOT MEETING REQUIREMENTS			
		STATE		NATION	
		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

## NURSING HOME PROFILE OCONEE GERIATRIC CENTER INC

Street Address:		City and State:	
ROUTE 6 HWY 59		SENECA SC 29678	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	132	PROPRIETARY	05/05/88

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
127			7	5	
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	120	94.5	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	122	96.1	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	106	83.5	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	110	86.6	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	105	82.7	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	6	4.7	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	80	63.0	45.2	37.7
Completely bedfast residents.		3	2.4	4.2	3.4
Residents confined to chairs.		89	70.1	61.6	50.8
Residents requiring restraints.		64	50.4	43.9	41.3
Confused or disoriented residents.		82	64.6	69.6	58.4
Table of algorithms registric					
Residents with bed sores.		8	6.3	7.0	7.1
nonanto mai pod soros.					
Residents receiving special skin care.		14	11.0	40.8	31.2
Tresidents receiving special skill care.			l	L	L

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FA				
		STATE		NAT		
		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	МЕТ	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
		STATE		+	TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE PALMETTO CONVALESCENT CENTER

	City and State:		
Street Address:		City and State:	
721 W CURTIS ST		SIMPSONVILLE SC 29681	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	42	PROPRIETARY	01/29/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
38			3	2	
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	21	55.3	74.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	29	76.3	79.3	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	27	71.1	61.9	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	21	55.3	63.3	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	14	36.8	54.5	59.1
Residents on individually written bowel	and bladder retraining program.	0	0.0	3.6	6.1
Eating	and states of the state of the				
Residents receiving tube feedings or re-	quiring assistance with eating.	8	21.1	17.7	29.3
Completely bedfast residents.		0	0.0	0.6	3.6
Residents confined to chairs.		13	34.2	24.8	39.1
Residents requiring restraints.		1	2.6	18.6	31.7
Confused or disoriented residents.		24	63.2	58.2	55.8
Residents with bed sores.		1	2.6	2.7	4.7
Residents receiving special skin care.		1	2.6	14.3	24.0
Ticolacina receiving special skill cale.		l			

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF NOT MEETING REQUIR				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6	
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				
below does not reflect the severity or the duration of the problems leading to a deficiency. A		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

# NURSING HOME PROFILE SENTRY CARE SIMPSONVILLE

		311111 9 9 11 1 1 1 1 1 1	
Street Address:		City and State:	
HIGHWAY 14		SIMPSONVILLE SC 29681	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	03/30/88

SELLOILE	RESIDENT CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
85	1		56			
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	72	84.7	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	70	82.4	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	70	82.4	82.6	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	70	82.4	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	71	83.5	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	2	2.4	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	27	31.8	45.2	37.7	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		36	42.4	61.6	50.8	
Residents requiring restraints.		5	5.9	43.9	41.3	
Confused or disoriented residents.		51	60.0	69.6	58.4	
Residents with bed sores.		9	10.6	7.0	7.1	
Residents receiving special skin care.		23	27.1	40.8	31.2	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
elow does not reflect the severity or the duration of the problems leading to a deficiency. A eficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	NAT	TION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	- 518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	МЕТ	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FACILITIES REQUIREMENTS	
				NAT	TION
deficiency may represent an ongoing problem of a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

### NURSING HOME PROFILE HARVEY S LOVE AND CARE

Street Address:		City and State:					
ROUTE 1		SIX MILE SC 29682					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICAID ICF	40	NON-PROFIT OTHER	04/15/88				

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:							
40  Caution: A large number of residents with these chara	0 cteristics does not indicate whether those	FACILITY		STATE	NATION		
residents are receiving appropriate or inappropriate car- highly specialized care and services.		#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	12	30.0	74.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	33	82.5	79.3	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	30	75.0	61.9	63.4		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	24	60.0	63.3	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	7	17.5	54.5	59.1		
Residents on individually written bowel	and bladder retraining program.	0	0.0	3.6	6.1		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	4	10.0	17.7	29.3		
Completely bedfast residents.		1	2.5	0.6	3.6		
Residents confined to chairs.		0	0.0	24.8	39.1		
-							
Residents requiring restraints.		5	12.5	18.6	31.7		
Confused or disoriented residents.		35	87.5	58.2	55.8		
Residents with bed sores.		1	2.5	2.7	4.7		
		_	10.5	140	04.0		
Residents receiving special skin care.		5	12.5	14.3	24.0		

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FACILITIES REQUIREMENTS		
	NOT	STATE		NAT	TION	
eficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	6	24.0	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	8	32.0	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	. 5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	3	12.0	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	NOT MET	5	20.0	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8	

# NURSING HOME PROFILE LAKEVIEW NURSING CENTER

Street Address:		City and State:	
RT 8 HIGHWAY 585		SPARTANBURG SC 29302	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	52	PROPRIETARY	01/29/88

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:									
51	0	43							
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION				
residents are receiving appropriate or inappropriate care highly specialized care and services.		#	%	%	%				
Bathing									
Residents requiring some or total assist	ance in bathing.	21	41.2	86.1	81.5				
Dressing									
Residents requiring some or total assist	ance in dressing.	44	86.3	90.6	83.2				
Toileting	a. 100 in a. 100 in g.								
Residents requiring some or total assist	ance in toileting.	36	70.6	82.6	73.8				
Transferring									
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	47	92.2	81.4	77.2				
Continence									
Residents with catheters or partial or total loss of bowel or bladder control.			64.7	74.3	68.2				
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6				
Eating									
Residents receiving tube feedings or red	quiring assistance with eating.	22	43.1	45.2	37.7				
Completely bedfast residents.		0	0.0	4.2	3.4				
Residents confined to chairs.		38	74.5	61.6	50.8				
Residents requiring restraints.		18	35.3	43.9	41.3				
Confused or disoriented residents.		22	43.1	69.6	58.4				
Residents with bed sores.		2	3.9	7.0	7.1				
			0.7.0	40.0	04.0				
Residents receiving special skin care.		18	35.3	40.8	31.2				

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
		MET/ NOT		ΝΔ	FION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%   %	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	NOT MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

below does not reflect the severity or the duration of the problems leading to a defiziency. A deficiency may represent an ongoing problem or a north-line failure of a single staff person.  Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/floostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident receives rehabilitative nursing care to promote opportunities of the food and functional physician.  Not met 14 12.4 1662 17.6  The rap is provided according to orders of the attending physician in accordance with physician for the resident food and Nutrition Board of the functional physician functional physician functional professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified ne	Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY			ENT OF FA	
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Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/fleostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.  Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.  Each resident needing assistance in eating or drinking is provided prompt assistance.  Specific self-help devices are available when necessary.  NOT MET 14 12.4 1662 17.6  Drugs are administered according to the written orders of the attending physician.  NOT MET 40 35.4 2739 29.0  Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians's orders, and to the extent medically nosable, based on the recommended dictary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9,7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  MET 14 12.4 816 8.6  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary, and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Resident care equipment is clean and mainta	deficiency may represent an ongoing problem or a one-time failure of a single staff person.	I .				
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Specific self-help devices are available when necessary.  NOT MET 14 12.4 1662 17.6  Drugs are administered according to the written orders of the attending physician.  NOT MET 40 35.4 2739 29.0  Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dictary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 2 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended delary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  MET 14 12.4 816 8.6  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  Toilet and bath facilities are clean, sanitary, and free of odors.  All common resident areas are clean, sanitary and free of odors.  MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  Not MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6
accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.  Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  MET 14 12.4 816 8.6  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.		NOT MET	40	35.4	2739	29.0
with accepted professional practices by qualified therapists or qualified assistants.  MET 11 9.7 587 6.2  Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 6 5.3 1408 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the	MET	22	19.5	1389	14.7
facility or by referral to an appropriate social agency.  MET 14 12.4 816 8.6  An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.  Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.  NOT MET  22  19.5  1270  13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  MET  3  2.7  1216  12.9  All common resident areas are clean, sanitary and free of odors.  MET  6  5.3  1041  11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET  1  0.9  1413  14.9  Resident care equipment is clean and maintained in safe operating condition.  MET  6  5.3  1408  14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET  55  48.7  2340  24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET  3  2.7  700  7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary		MET	14	12.4	816	8.6
according to the instructions of the attending physician.  NOT MET 22 19.5 1270 13.4  Toilet and bath facilities are clean, sanitary, and free of odors.  MET 3 2.7 1216 12.9  All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  NOT MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	and interests of each resident. It is designed to promote opportunities for engaging	NOT MET	8	7.1	1099	11.6
All common resident areas are clean, sanitary and free of odors.  MET 6 5.3 1041 11.0  All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	22	19.5	1270	13.4
All essential mechanical and electrical equipment is maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1041 11.0  MET 1 0.9 1413 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
Resident care equipment is clean and maintained in safe operating condition.  MET 1 0.9 1413 14.9  Resident care equipment is clean and maintained in safe operating condition.  MET 6 5.3 1408 14.9  Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
Isolation techniques to prevent the spread of infection are followed by all personnel.  NOT MET 55 48.7 2340 24.7  The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary		MET	1	0.9	1413	14.9
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.  NOT MET 55 48.7 2340 24.7  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
comfort of residents.  MET 3 2.7 700 7.4  Food is stored, refrigerated, prepared, distributed, and served under sanitary	Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
		МЕТ	3	2.7	700	7.4
		MET	41	36.3	4050	42.8

# NURSING HOME PROFILE MOUNTAINVIEW NH

 Street Address:
 City and State:

 340 CEDAR SPRINGS RD
 SPARTANBURG SC 29302

 Participation:
 # of Beds:
 Type of Ownership:
 Survey Date:

 MEDICARE/MEDICAID SNF/ICF
 132
 NON-PROFIT OTHER
 11/05/87

SELECTEL	RESIDENT CHARACTERIST	105				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
129	3					
Caution: A large number of residents with these chara-		FACILITY STATE # % %			NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide				%	
Bathing						
Residents requiring some or total assist	ance in bathing.	94	72.9	86.1	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	108	83.7	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	107	82.9	82.6	73.8	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	107	82.9	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	97	75.2	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	4	3.1	4.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	45	34.9	45.2	37.7	
Completely bedfast residents.		4	3.1	4.2	3.4	
Residents confined to chairs.		105	81.4	61.6	50.8	
Residents requiring restraints.		70	54.3	43.9	41.3	
					:	
Confused or disoriented residents.		67	51.9	69.6	58.4	
A fact of the second se						
Residents with bed sores.		4	3.1	7.0	7.1	
Residents receiving special skin care.		3	2.3	40.8	31.2	

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACILI NOT MEETING REOUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	TATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE PINEWOOD CONVALESCENT CENTER

1 1111 11 11 11 11 11 11 11 11 11 11 11	JOB CONTA	PEROPERT OFFILE	
Street Address:		City and State:	
375 SERPENTINE DR		SPARTANBURG SC 29303	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNE/ICE	95	PROPRIETARY	12/02/87

SELECTED RESIDENT CHARACTERISTICS								
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:						
91	0	75						
Caution: A large number of residents with these characresidents are receiving appropriate or inappropriate care	cteristics does not indicate whether those	FACILITY STATE		NATION				
highly specialized care and services.	. It may reflect the facility 3 ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assista	ance in bathing.	74	81.3	86.1	81.5			
Dressing								
Residents requiring some or total assista	ance in dressing.	85	93.4	90.6	83.2			
Toileting								
Residents requiring some or total assista	ance in toileting.	78	85.7	82.6	73.8			
Transferring				-				
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	71	78.0	81.4	77.2			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	70	76.9	74.3	68.2			
				-				
Residents on individually written bowel a	and bladder retraining program.	33	36.3	4.2	4.6			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	33	36.3	45.2	37.7			
Completely bedfast residents.		10	11.0	4.2	3.4			
Residents confined to chairs.		51	56.0	61.6	50.8			
Residents requiring restraints.		41	45.1	43.9	41.3			
Confused or disoriented residents.		73	80.2	69.6	58.4			
Residents with bed sores.		33	36.3	7.0	7.1			
Residents receiving special skin care.		28	30.8	40.8	31.2			

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<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES  NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		TAN	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.				RCENT OF FACILITIES NG REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION
deficiency may represent an origonity problem of a orie-time failure of a single stail person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE SPARTANBURG CONVALESCENT CENTER INC

	oria conve	PEOOFILI OFILIFILING			
Street Address:		City and State:			
295 E PEARL ST		SPARTANBURG SC 29303			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE/MEDICAID SNF/ICF	192	NON-PROFIT PRIVATE	07/16/87		

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
189	0		10	06	
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		FACILITY STATE		NATION	
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assists	ance in bathing.	172	91.0	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	183	96.8	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	183	96.8	82.6	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	160	84.7	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	83	43.9	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	6	3.2	4.2	4.6
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	63	33.3	45.2	37.7
Completely bedfast residents.		2	1.1	4.2	3.4
Residents confined to chairs.		156	82.5	61.6	50.8
Residents requiring restraints.		70	37.0	43.9	41.3
Confused or disoriented residents.		115	60.8	69.6	58.4
Residents with bed sores.		4	2.1	7.0	7.1
Residents receiving special skin care.		18	9.5	40.8	31.2
Residents receiving special skin care.		18	9.5	40.8	31.2

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.			ATE		ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

teminder: These 32 selected performance indicators do not represent all the requirements a accility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FA			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	TAN	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	мет	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE WHITE OAK ESTATES INC

	WHILE OAK	STATES INC	
Street Address:		City and State:	
400 WEBBER RD		SPARTANBURG SC 29302	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE SNF/ICF	44	PROPRIETARY	10/07/87

SELECTEL	RESIDENT CHARACTERIST	103	,			
Total Residents on Day of Survey:	Medicare Residents:	Medic	Medicaid Residents:			
26	0		(	)		
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	22	84.6	86.1	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	25	96.2	90.6	83.2	
Toileting						
Residents requiring some or total assista	ance in toileting.	21	80.8	82.6	73.8	
Transferring						
Residents requiring some or total assistatub or toilet.	22	84.6	81.4	77.2		
Continence						
Residents with catheters or partial or to	20	76.9	74.3	68.2		
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	9	34.6	45.2	37.7	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		10	38.5	61.6	50.8	
Residents requiring restraints.		7	26.9	43.9	41.3	
Confused or disoriented residents.		15	57.7	69.6	58.4	
Residents with bed sores.		3	11.5	7.0	7.1	
Residents receiving special skin care.		5	19.2	40.8	31.2	

was deficient in the indicated area at the time of the survey.					
teminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented elow does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA	
	NOT	ST	TATE	NAT	ΓΙΟΝ
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

# NURSING HOME PROFILE ST GEORGE HEALTH CARE CENTER INC

Street Address:		City and State:	
905 DUKES ST		ST GEORGE SC 29477	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	02/03/88

SELECTEL	RESIDENT CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medic	Medicaid Residents:			
87	2		7	5		
Caution: A large number of residents with these characresidents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION	
highly specialized care and services.		#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	87	100	86.1	81.5	
Dressing					Į.	
Residents requiring some or total assist	ance in dressing.	70	80.5	90.6	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	68	78.2	82.6	73.8	
Transferring						
Residents requiring some or total assistate tub or toilet.	72	82.8	81.4	77.2		
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.		59	67.8	74.3	68.2	
riesidents with catheters of partial of to	tal loss of bower of bladder control.	00		1		
Posidonto on individually written havely	and bladder retraining program	3	3.4	4.2	4.6	
Residents on individually written bowel a	and bladder retraining program.	- 3	0.4	7.2	4.0	
		38	43.7	45.2	37.7	
Residents receiving tube feedings or rec	quiring assistance with eating.	30	43.7	45.2	37.7	
			0.0	4.0	0.4	
Completely bedfast residents.		0	0.0	4.2	3.4	
Residents confined to chairs.		54	62.1	61.6	50.8	
-						
Residents requiring restraints.		42	48.3	43.9	41.3	
Confused or disoriented residents.		53	60.9	69.6	58.4	
Residents with bed sores.		2	2.3	7.0	7.1	
Residents receiving special skin care.		87	100	40.8	31.2	
		1	<u> </u>			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	_
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	пот	ST	ATE	NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	мет	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6
Nursing services are provided at all times to meet the needs of residents.  Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.  Each resident receives care necessary to prevent skin breakdown.  Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.  Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.  Each resident with a urinary catheter receives proper routine care, including periodic	MET  NOT MET  NOT MET	11 29 35 22 38	9.7 25.7 31.0 19.5 33.6	508 2816 1733 1052 1512	11

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FACILITIES REOUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE	-	TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	МЕТ	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	МЕТ	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

# NURSING HOME PROFILE COASTAL CENTER LIVE OAK VILLAGE

	OCACIAL CENTENT LIVE CAR VILLAGE						
Street Address: City and State:							
620 CENTRAL AVE		SUMMERVILLE SC 29483					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	50	STATE GOVERNMENT	11/13/87				

SELECTED	RESIDENT CHARACTERIST	ics			
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resid	dents:	
49	0		4	.9	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	41	83.7	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	43	87.8	90.6	83.2
Toileting				1	
Residents requiring some or total assist	ance in toileting.	31	63.3	82.6	73.8
Transferring	anno moving from had to obair or to				
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	30	61.2	81.4	77.2
Continence					
Residents with catheters or partial or to	32	65.3	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	16	32.7	45.2	37.7
Completely bedfast residents.		0	0.0	4.2	3.4
Residents confined to chairs.		17	34.7	61.6	50.8
Residents requiring restraints.		18	36.7	43.9	41.3
	-				
Confused or disoriented residents.		45	91.8	69.6	58.4
Residents with bed sores.		45	91.8	7.0	7.1
Residents receiving special skin care.		19	38.8	40.8	31.2

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.			NUMBER & PERCE NOT MEETING		
			ATE		ION
deficiently may represent an engoing problem of a one-time failure of a single star person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

	FACILITY					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF NOT MEETING REQUIRE				
		STATE		NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	NOT MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	мет	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	

## NURSING HOME PROFILE OAKBROOK CONVALESCENT CTR

Street Address:		City and State:			
920 TRAVELERS BLVD		SUMMERVILLE SC 29483			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	04/07/88		

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:								
Total nesidents on Day of Survey.	medicare nesidents.	Medicald nesidents.						
80	5		4	4				
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care			ILITY	STATE	NATION			
highly specialized care and services.		#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	67	83.7	86.1	81.5			
Dressing								
Residents requiring some or total assista	ance in dressing.	72	90.0	90.6	83.2			
Toileting								
Residents requiring some or total assist	ance in toileting	69	86.2	82.6	73.8			
Transferring	and in teneting.							
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	66	82.5	81.4	77.2			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	61	76.2	74.3	68.2			
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	45	56.3	45.2	37.7			
Completely bedfast residents.		3	3.7	4.2	3.4			
Residents confined to chairs.		52	65.0	61.6	50.8			
				i				
Residents requiring restraints.		48	60.0	43.9	41.3			
Confused or disoriented residents.		62	77.5	69.6	58.4			
Residents with bed sores.		10	12.5	7.0	7.1			
Residents receiving special skin care.		23	28.7	40.8	31.2			
residents receiving special skill care.					L			

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FA				
		ST	ATE	NA	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
		π	/6	11	/6	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.			5.0	201		
	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Table 1 Total Control of the Control			1110	0.0	0.0	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	NOT MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY			ENT OF FA	
facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NOT	NOT MEETING		IENTS
		STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	мет	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	мет	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE COMMUNITY NH

Street Address: City and State:			
Street Address:		City and State:	
703 BROAD ST		SUMTER SC 29150	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	20	NON-PROFIT OTHER	07/29/87

SELECTEL	RESIDENT CHARACTERIST	165					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
19	19 0			9			
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	7	36.8	74.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	14	73.7	79.3	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	6	31.6	61.9	63.4		
Transferring							
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	6	31.6	63.3	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	6	31.6	54.5	59.1		
Residents on individually written bowel a	and bladder retraining program.	0	0.0	3.6	6.1		
Eating							
Residents receiving tube feedings or red	quiring assistance with eating.	2	10.5	17.7	29.3		
Completely bedfast residents.		0	0.0	0.6	3.6		
Residents confined to chairs.		1	5.3	24.8	39.1		
Residents requiring restraints.		2	10.5	18.6	31.7		
Confused or disoriented residents.		11	57.9	58.2	55.8		
Residents with bed sores.		0	0.0	2.7	4.7		
Residents receiving special skin care.		1	5.3	14.3	24.0		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FACILITIES REQUIREMENTS	
		ST	ATE	NAT	ION
deliciency may represent an origoning problem of a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	МЕТ	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERCE MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE		NATION # 9/	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	мет	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	мет	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

# NURSING HOME PROFILE CYPRESS NURSING FACILITY

 Street Address:
 City and State:

 PO BOX 1526
 SUMTER SC 29150

 Participation:
 # of Beds:
 Type of Ownership:
 Survey Date:

 MEDICARE/MEDICAID SNF
 88
 PROPRIETARY
 06/19/87

SELECTED	RESIDENT CHARACTERIST	ics					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
85	3	51					
Caution: A large number of residents with these characteristics		FAC	FACILITY		FACILITY STA		NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	83	97.6	86.1	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	79	92.9	90.6	83.2		
Toileting							
Residents requiring some or total assista	ance in toileting.	76	89.4	82.6	73.8		
Transferring							
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	77	90.6	81.4	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	76	89.4	74.3	68.2		
·							
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6		
Eating	<u> </u>						
Residents receiving tube feedings or rec	quiring assistance with eating.	51	60.0	45.2	37.7		
Completely bedfast residents.		9	10.6	4.2	3.4		
Residents confined to chairs.		72	84.7	61.6	50.8		
_							
Residents requiring restraints.		24	28.2	43.9	41.3		
Confused or disoriented residents.		76	89.4	69.6	58.4		
					-		
Residents with bed sores.		7	8.2	7.0	7.1		
Residents receiving special skin care.		82	96.5	40.8	31.2		
Transfer to conting Special Skill date.	270		I		<u></u>		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERC		
below does not reflect the severity or the duration of the problems leading to a deficiency. A		STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		T	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

## NURSING HOME PROFILE HAMPTON NURSING CENTER

	TITALITY OF THE PROPERTY OF TH				
Street Address:		City and State:			
975 MILLER ROAD BOX 1568		SUMTER SC 29150			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	07/17/87		

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:			
86	3	65			65		
Caution: A large number of residents with these characteristics		FACILITY		STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assista	ance in bathing.	71	82.6	86.1	81.5		
Dressing							
Residents requiring some or total assista	ance in dressing.	81	94.2	90.6	83.2		
Toileting	3						
Residents requiring some or total assista	ance in toileting.	67	77.9	82.6	73.8		
Transferring							
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	86	100	81.4	77.2		
Continence							
Residents with catheters or partial or tot	tal loss of bowel or bladder control.	62	72.1	74.3	68.2		
Residents on individually written bowel a	and bladder retraining program.	3	3.5	4.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	30	34.9	45.2	37.7		
Completely bedfast residents.		0	0.0	4.2	3.4		
Residents confined to chairs.		48	55.8	61.6	50.8		
Residents requiring restraints.		38	44.2	43.9	41.3		
Confused or disoriented residents.		63	73.3	69.6	58.4		
Residents with bed sores.		8	9.3	7.0	7.1		
Residents receiving special skin care.		41	47.7	40.8	31.2		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT		ATE	NAT		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	% ATE	#	% %	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	мет	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	мет	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	МЕТ	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	МЕТ	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	A (1 1			
facility must meet. There are over 500 separate requirements. The information presented				NT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	ST	ATE	NA	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	мет	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

### NURSING HOME PROFILE HOPEWELL HEALTHCARE CENTER

Street Address:		City and State:	
PINEWOOD RD BOX 818		SUMTER SC 29150	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	96	PROPRIETARY	05/08/87

96  Caution: A large number of residents with these characteristics does not indicate whether those residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.  Bathing	FAC		77	
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.				
highly specialized care and services.	#	JILII I	STATE	NOITAN
Rathing		%	%	%
Dating				
Residents requiring some or total assistance in bathing.	96	100	74.2	78.3
Dressing				
Residents requiring some or total assistance in dressing.	70	72.9	79.3	76.7
Toileting				
Residents requiring some or total assistance in toileting.	75	78.1	61.9	63.4
Transferring Transferring				
Residents requiring some or total assistance moving from bed to chair or to tub or toilet.	70	72.9	63.3	66.0
Continence				
Residents with catheters or partial or total loss of bowel or bladder control.	65	67.7	54.5	59.1
Residents on individually written bowel and bladder retraining program.	0	0.0	3.6	6.1
Eating				
Residents receiving tube feedings or requiring assistance with eating.	14	14.6	17.7	29.3
Completely bedfast residents.	0	0.0	0.6	3.6
Residents confined to chairs.	25	26.0	24.8	39.1
Residents requiring restraints.	5	5.2	18.6	31.7
Confused or disoriented residents.	74	77.1	58.2	55.8
Residents with bed sores.	0	0.0	2.7	4.7
Residents receiving special skin care.	0	0.0	14.3	24.0

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		T	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	1 %	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	1	4.0	198	3.6	
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	4	16.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	4	16.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	2	8.0	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	10	40.0	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	2	8.0	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA REQUIREN	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	6	24.0	2452	44.8

## NURSING HOME PROFILE NATIONAL HEALTHCARE CTR OF SUMTER

Street Address:		City and State:	
1018 N GUIGNARD BOX 1524		SUMTER SC 29150	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	100	PROPRIETARY	02/12/88

SELECTEL	RESIDENT CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
100	100 5			6		
	Caution: A large number of residents with these characteristics does not indicate whether those residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		FACILITY		NATION	
			%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	99	99.0	86.1	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	100	100	90.6	83.2	
Toileting						
Residents requiring some or total assista	ance in toileting.	99	99.0	82.6	73.8	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	98	98.0	81.4	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	92	92.0	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	4	4.0	4.2	4.6	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	64	64.0	45.2	37.7	
Completely bedfast residents.		6	6.0	4.2	3.4	
Residents confined to chairs.		79	79.0	61.6	50.8	
Residents requiring restraints.		55	55.0	43.9	41.3	
Confused or disoriented residents.		87	87.0	69.6	58.4	
Residents with bed sores.		10	10.0	7.0	7.1	
				10.5	0.4.0	
Residents receiving special skin care.		49	49.0	40.8	31.2	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the equirity or the duration of the problems leading to a deficiency.	FACILITY MET/	NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	. 518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

	FACILITY					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an appoint problem or a one-time failure of a single staff posses.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
		STATE		NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	МЕТ	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	
					-	

## NURSING HOME PROFILE OAKMONT NORTH NURSING CENTER

OAKMON NOTHING CENTER							
Street Address:		City and State:					
PO BOX 946		TRAVELERS REST SC 29690					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	22	PROPRIETARY	03/09/88				

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
22	0	21			
Caution: A large number of residents with these char		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate can highly specialized care and services.	are. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assis	stance in bathing.	20	90.9	86.1	81.5
Dressing					
Residents requiring some or total assis	stance in dressing.	22	100	90.6	83.2
Toileting					
Residents requiring some or total assis	stance in toileting.	21	95.5	82.6	73.8
Transferring					
Residents requiring some or total assistub or toilet.	stance moving from bed to chair or to	21	95.5	81.4	77.2
Continence					
Residents with catheters or partial or t	otal loss of bowel or bladder control.	21	95.5	74.3	68.2
Residents on individually written bowe	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or re	equiring assistance with eating.	14	63.6	45.2	37.7
Completely bedfast residents.		1	4.5	4.2	3.4
Completely bedrast residents.					
Residents confined to chairs.		19	86.4	61.6	50.8
Residents requiring restraints.		18	81.8	43.9	41.3
Confused or disoriented residents.		16	72.7	69.6	58.4
Residents with bed sores.		1	4.5	7.0	7.1
		04	05.5	40.0	04.0
Residents receiving special skin care.		21	95.5	40.8	31.2

	T					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			CENT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	TON	
deficiency may represent an origonity problem of a one-time failure of a single stant person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	МЕТ	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	МЕТ	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	МЕТ	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	NUMBE	R & PERCI	ENT OF FA	CILITIES	
facility must meet. There are over 500 separate requirements. The information presented		NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22_	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	
	-		-			

## NURSING HOME PROFILE ELLEN SAGAR NH

Street Address:		City and State:	
RT 7 BOX 138		UNION SC 29379	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	64	LOCAL GOVERNMENT	10/23/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
64	0		4	48	
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	43	67.2	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	54	84.4	90.6	83.2
Toileting	<u> </u>				
Residents requiring some or total assist	ance in toileting.	45	70.3	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	51	79.7	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	39	60.9	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	26	40.6	45.2	37.7
Completely bedfast residents.		2	3.1	4.2	3.4
Residents confined to chairs.		45	70.3	61.6	50.8
Residents requiring restraints.		27	42.2	43.9	41.3
Confused or disoriented residents.		41	64.1	69.6	58.4
		4	6.3	7.0	7.1
Residents with bed sores.		4	0.3	7.0	7.1
		9	14.1	40.8	31.2
Residents receiving special skin care.		3	14.1	40.0	01.2

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILI NOT MEETING REQUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	NOT MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NA	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8	

# NURSING HOME PROFILE OAKMONT OF UNION

	OAKINONI	OI CINIOIA	
Street Address:		City and State:	
201 RICE STREET EXTENSION		UNION SC 29379	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	88	PROPRIETARY	06/19/87

SELECTEL	RESIDENT CHARACTERIST	ICS			
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
83	0		6	§5	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
highly specialized care and services.	residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	80	96.4	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	80	96.4	90.6	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	62	74.7	82.6	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	67	80.7	81.4	77.2
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.		52	62.7	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	8	9.6	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	69	83.1	45.2	37.7
			0.4	4.0	0.4
Completely bedfast residents.		2	2.4	4.2	3.4
		E 1	61.4	61.6	50.8
Residents confined to chairs.		51	01.4	01.0	30.8
		41	49.4	43.9	41.3
Residents requiring restraints.		41	43.4	40.9	41.5
		74	00.0	69.6	EQ. 4
Confused or disoriented residents.		74	89.2	09.0	58.4
		11	13.3	7.0	7.1
Residents with bed sores.		11	10.0	7.0	7.1
		20	4F O	40.0	21.0
Residents receiving special skin care.		38	45.8	40.8	31.2

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITY NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		TATE	+	ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.		41	36.3	4050	42.8

## NURSING HOME PROFILE OAKWOOD HEALTH CARE CENTER INC

Street Address:		City and State:	
401 WITSELL ST BOX 1154		WALTERBORO SC 29488	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	132	PROPRIETARY	05/21/87

	RESIDENT CHARACTERIST				
Total Residents on Day of Survey:	Medicare Residents:	Medic			
129	1		1	18	
Caution: A large number of residents with these chara-		FAC	FACILITY		NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	91	70.5	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing	117	90.7	90.6	83.2
Toileting	arios in drossing.		00.7	00.0	- 00.2
•		106	82.2	82.6	73.8
Residents requiring some or total assist	ance in tolleting.	100	02.2	02.0	73.0
Transferring  Residents requiring some or total assist	ance moving from bed to chair or to				
tub or toilet.		109	84.5	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	75	58.1	74.3	68.2
Residents on individually written bowel	and bladder retraining program.	4	3.1	4.2	4.6
Eating	<u> </u>				
Residents receiving tube feedings or rec	quiring assistance with eating	42	32.6	45.2	37.7
	quining accidence man caung.				
Completely hadfast residents		6	4.7	4.2	3.4
Completely bedfast residents.			1.7	1	
		75	50.1	61.6	50.0
Residents confined to chairs.		75	58.1	61.6	50.8
Residents requiring restraints.		51	39.5	43.9	41.3
Confused or disoriented residents.		79	61.2	69.6	58.4
Residents with bed sores.		13	10.1	7.0	7.1
THE POR SOLO	41.				
Decidents receiving an elebelia of		40	31.0	40.8	31.2
Residents receiving special skin care.		1			

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCENT OF F			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET		ATE		ION	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	мет	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	МЕТ	23	20.4	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCI MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION
	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8

## NURSING HOME PROFILE MANOR CARE REHAB AND NURSING CTR

Street Address:

2416 SUNSET BLVD

WEST COLUMBIA SC 29169

Participation:

# of Beds: Type of Ownership: Survey Date:

MEDICARE/MEDICAID SNF/ICF

120

PROPRIETARY

07/24/87

	RESIDENT CHARACTERIST			_	
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
93	10		3	3	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate can highly specialized care and services.	e. It may reflect the facility's ability to provide	#	# % %		%
Bathing					
Residents requiring some or total assist	ance in bathing.	82	88.2	86.1	81.5
Dressing					
Residents requiring some or total assist	ance in dressing	85	91.4	90.6	83.2
Toileting	and in disselling.		0111	00.0	00.2
		7,-	00.0	00.0	70.0
Residents requiring some or total assist	ance in toileting.	75	80.6	82.6	73.8
Transferring  Residents requiring some or total assist	ance moving from bed to chair or to				
tub or toilet.		76	81.7	81.4	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	72	77.4	74.3	68.2
				_	
Residents on individually written bowel	and bladder retraining program.	6	6.5	4.2	4.6
Eating	and stades relianting programm				
Residents receiving tube feedings or receiving	guiring applications with pating	42	45.2	45.2	37.7
Residents receiving tube reedings of rec	quilling assistance with eating.	72	10.2	10.2	
			0.0	4.0	0.4
Completely bedfast residents.		0	0.0	4.2	3.4
Residents confined to chairs.		54	58.1	61.6	50.8
Residents requiring restraints.		30	32.3	43.9	41.3
Confused or disoriented residents.		72	77.4	69.6	58.4
Commode of algorithms registeries.				,	
Decide the with head and		3	3.2	7.0	7.1
Residents with bed sores.		-	0.2	1.0	7.1
		0.1	00.0	40.0	04.0
Residents receiving special skin care.		21	22.6	40.8	31.2

facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILIT NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET/ NOT	ST	ATE	NATION	
deficiency may represent an originity problem of a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	NOT MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

<b>Reminder:</b> These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILIT NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	S1	ГАТЕ	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	14	12.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	мет	8	7.1	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	МЕТ	22	19.5	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	41	36.3	4050	42.8

## NURSING HOME PROFILE LOWMAN HOME-WYNNE C BOLIEK NCF

 Street Address:
 City and State:

 U S HWY 76
 WHITE ROCK SC 29177

 Participation:
 # of Beds:
 Type of Ownership:
 Survey Date:

 MEDICARE/MEDICAID SNF/ICF
 129
 NON-PROFIT RELIGIOUS
 11/05/87

Total Residents on Day of Survey:	Medicare Residents:	Medic			
127	28		5	55	
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		those FACILITY		STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assists	ance in bathing.	125	98.4	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	126	99.2	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	109	85.8	82.6	73.8
Transferring					
Residents requiring some or total assists tub or toilet.	ance moving from bed to chair or to	111	87.4	81.4	77.2
Continence					
Residents with catheters or partial or tot	tal loss of bowel or bladder control.	70	55.1	74.3	68.2
Residents on individually written bowel a	and bladder retraining program.	0	0.0	4.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	43	33.9	45.2	37.7
Completely bedfast residents.		1	0.8	4.2	3.4
Residents confined to chairs.		47	37.0	61.6	50.8
Residents requiring restraints.		64	50.4	43.9	41.3
Confused or disoriented residents.		91	71.7	69.6	58.4
Residents with bed sores.		6	4.7	7.0	7.1
Residents receiving special skin care.		14	11.0	40.8	31.2

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/		ATE		ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	38	33.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	23	20.4	1665	17.6	
				1		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NATION			
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	47	41.6	1123	11.9		
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	35	31.0	2045	21.6,		
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6		
Drugs are administered according to the written orders of the attending physician.	мет	40	35.4	2739	29.0		
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7		
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2		
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6		
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6		
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4		
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9		
All common resident areas are clean, sanitary and free of odors.	мет	6	5.3	1041	11.0		
All essential mechanical and electrical equipment is maintained in safe operating condition.	мет	1	0.9	1413	14.9		
Resident care equipment is clean and maintained in safe operating condition.	МЕТ	6	5.3	1408	14.9		
Isolation techniques to prevent the spread of infection are followed by all personnel.	МЕТ	55	48.7	2340	24.7		
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4		
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8		

**Reminder:** The results of the full survey are available from the State survey agency or the State ombudsman.

# NURSING HOME PROFILE KIRKLAND CONVALESCENT HOME INC ICF

Street Address:		City and State:	
PO BOX 250		WILLISTON SC 29853	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	20	PROPRIETARY	09/02/87

## **SELECTED RESIDENT CHARACTERISTICS**

JEEC I EL	HESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
19	0	19			
Caution: A large number of residents with these chara-		FACILITY		STATE	NATION
highly specialized care and services.	esidents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide lighly specialized care and services.			%	%
Bathing					
Residents requiring some or total assist	18	94.7	74.2	78.3	
Dressing					
Residents requiring some or total assist	ance in dressing.	17	89.5	79.3	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	15	78.9	61.9	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	13	68.4	63.3	66.0
Continence		1			
Residents with catheters or partial or to	13	68.4	54.5	59.1	
nesidents with catheters of partial of to	tarioss of bower of bladder control.	10	00.4	7 7.0	00.1
Davidanta esta l'ide lle estimate de la		9	47.4	3.6	6.1
Residents on individually written bowel a	and bladder retraining program.	3	47.4	3.0	0.1
			01.1	477	00.0
Residents receiving tube feedings or rec	quiring assistance with eating.	4	21.1	17.7	29.3
Completely bedfast residents.		1	5.3	0.6	3.6
Residents confined to chairs.		8	42.1	24.8	39.1
-					
Residents requiring restraints.		5	26.3	18.6	31.7
Confused or disoriented residents.		12	63.2	58.2	55.8
Residents with bed sores.		0	0.0	2.7	4.7
Residents receiving special skin care.		3	15.8	14.3	24.0
				1	

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	мет	1	4.0	198	3.6
Each resident is free from mental and physical abuse.	MET	0	0.0	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	0	0.0	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	1	4.0	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	4.0	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	4.0	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	NOT MET	4	16.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	4	16.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	1	4.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	2	8.0	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	10	40.0	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	2	8.0	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	NUMBE	R & PERC	ENT OF FA	CILITIES
facility must meet. There are over 500 separate requirements. The information presented	MET/	NOT	MEETING	REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	3	12.0	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	1	4.0	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	0	0.0	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	6	24.0	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	8	32.0	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	0	0.0	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	4	16.0	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	3	12.0	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	7	28.0	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	6	24.0	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	5	20.0	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	1	4.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	6	24.0	2452	44.8

Reminder: The results of the full survey are available from the State survey agency or the State ombudsman.

# NURSING HOME PROFILE DIVINE SAVIOUR NH

DIVINE OAVIOORI IIII							
Street Address:		City and State:					
111 S CONGRESS ST		YORK SC 29745					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNF/ICF	51	NON-PROFIT RELIGIOUS	05/18/88				

## SELECTED RESIDENT CHARACTERISTICS

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
50	0	34			
Caution: A large number of residents with these characteristics		FACILITY		STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	46	92.0	86.1	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	49	98.0	90.6	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	43	86.0	82.6	73.8
Transferring					
Residents requiring some or total assistation tub or toilet.	ance moving from bed to chair or to	44	88.0	81.4	77.2
Continence					
Residents with catheters or partial or to	44	88.0	74.3	68.2	
Residents on individually written bowel a	and bladder retraining program.	4	8.0	4.2	4.6
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	27	54.0	45.2	37.7
Completely bedfast residents.		6	12.0	4.2	3.4
Residents confined to chairs.		44	88.0	61.6	50.8
Residents requiring restraints.		26	52.0	43.9	41.3
•					
Confused or disoriented residents.	32	64.0	69.6	58.4	
Residents with bed sores.		2	4.0	7.0	7.1
Residents receiving special skin care.		50	100	40.8	31.2

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented			R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.3	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	13	11.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	3	2.7	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	34	30.1	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	7	6.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	0	0.0	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	2	1.8	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	11	9.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	29	25.7	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	35	31.0	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	22	19.5	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	38	33.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	23	20.4	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NA <sup>-</sup>	TION	
deficiency may represent an ongoing problem of a one-time failure of a single stan person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	47	41.6	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	35	31.0	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	14	12.4	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	40	35.4	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	22	19.5	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	9.7	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	14	12.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	8	7.1	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	22	19.5	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	3	2.7	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	6	5.3	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	1	0.9	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	6	5.3	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	55	48.7	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	2.7	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	41	36.3	4050	42.8	

**Reminder:** The results of the full survey are available from the State survey agency or the State ombudsman.



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